



STAFFORDSHIRE COUNTY COUNCIL

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**The 58th  
ANNUAL REPORT**

OF THE

**County Principal  
School Medical Officer**

**For the year 1965**







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# Annual Report of the County Principal School Medical Officer for 1965

For the first time for many years the area and population of the County have been changed by boundary revisions. Although in the year under review there was relatively little change, at the time of writing the large reduction in population and area has occurred by the deduction from the County of the "Black Country." So we are concerned in the report with a loss of school population in the districts transferred to Stoke-on-Trent and a slightly larger number added from Warwickshire. The increase in the population in the County as a whole accounts for the added 5,000 school children making a total of 156,000 (excluding Newcastle Excepted District).

The number of children examined at routine inspections was 6,000 more than last year and there was an increase in the number of defects detected. This was an absolute increase and not consequent upon the added inspections. This is a reminder of the value of this aspect of the work which is, in fact, a very longstanding and well tried "mass examination." Such examinations of apparently well people either for particular complaints, or general examinations, are being increasingly advocated for the adult population, but at no time of life is it of more importance than in the young.

The statistics show that the main advances in the service during the year were the increase in chiropody care; health education, and child guidance service.

Some years ago when the Council approved a scheme to provide chiropody, it was intended that 20% of the time of the chiropodists should be devoted to the treatment of school children, but not until this year has it been possible to provide a significant number of treatments. In the year nearly 10,000 treatments were given and, unfortunately, this was only a small part of what is needed. The defects treated are in addition to the wart infections noted by the school nurses in their visits to the schools.

The report of the Health Education Officer is encouraging and an effective service to the schools is now being built up. There has been excellent co-operation with the dental section in their aspect of health education in which the Dental Auxiliaries have played a valuable part. Lectures to pupils on preparation for marriage have been particularly popular both from the teachers' aspect and the older pupils. Agreement

has been reached in most parts of the County with the Marriage Guidance Council as regards the suitable interlocking of their work and that of the section.

An increased number of children were seen at the Child Guidance clinics and while one is glad that a better service was available one must regret the need. There is a particular staffing difficulty in this section of the department.

With the development of the Diagnostic Unit established at Northfields C.P. School in Stafford, more attention is now being paid to the condition which gives rise to the name "Autistic Child." The diagnosis of this is sometimes most difficult and the Diagnostic Unit has provided an excellent additional help. The provision of remedial conditions for these children requires more thought and the numbers imply that a regional provision would be more effective than a school limited to the County Council.

Mention is made each year of the lack of staff in the Dental Section and in respect of numbers this year provides no better picture than formerly. But the adoption by the Education Committee of the Minister's recommendation of the creation of senior posts may help recruitment. Furthermore the number of dental auxiliaries employed was seven, and an establishment of eight approved. Experience of the good work of these officers in the last three years is such that it is hoped to recruit as many dental auxiliaries as possible.

Cases treated for speech defects showed a satisfactory increase in the year and fewer names were on the waiting list at the end of the year. In mentioning handicaps it is opportune to point out that the apparently large increases in mal-adjusted children and delicate children in tables 4 and 48 is not actual. The figures given relate to the numbers reported by the medical officers, teachers and others as such and not to formally ascertained cases.

Once again it is a pleasant duty to refer to the devoted work of the department's staff and generous co-operation of other departments to secure better health amongst the school population—instanced by the high incidence of deafness (61%) amongst the school children referred for special examination by teachers, compared with 12% amongst those examined as a routine. Relationships and co-operation with the Director of Education and his staff are particularly cordial and the interest and support of the Education Committee in the work of the School Health Service is a great encouragement for which this Department is most grateful.

G. RAMAGE,  
*County Principal School Medical Officer*

School Health Service,  
County Buildings, Stafford.

# SCHOOL HEALTH SERVICE STAFF, 1965

## County Principal School Medical Officer

G. RAMAGE, M.A. (Admin.), M.D., Ch.B., B.Sc., M.R.C.S., L.R.C.P., D.P.H.

## Deputy Principal County School Medical Officer

A. WITHNELL, B.Sc., M.D., Ch.B., D.P.H.

## Senior Administrative Medical Officer for Schools

A. BLENCH, L.R.C.P., L.R.C.S., L.R.F.P.S., D.P.H.

## Senior Medical Officer

H. E. WILSON, M.B., Ch.B., D.O., D.P.H.

## Whole-Time School Medical Officers

G. KATHLEEN BIRCHENOUGH, M.R.C.S., L.R.C.P., D.P.H.

AGNES W. E. BLACK, M.B., B.Ch., B.A.O., D.P.H.

PEARL I. BLENCH, L.R.C.P., L.R.C.S., L.R.F.P.S.

NORAH M. CLARKE, M.B., Ch.B.

G. R. DAVIES, B.Sc., L.M.S.S.A.

T. W. G. DONOHOE, M.B., Ch.B., D.R.C.O.G. (Resigned 15.5.65)

DOREEN E. GEORGE, M.B., Ch.B.

MATILDA DOROTHY GODWIN, M.B., B.Ch., B.A.O. (Resigned W/T appointment 5.4.65)

BESSIE W. GOODWILL, M.B., Ch.B., M.R.C.S., L.R.C.P.

MARY M. MARKHAM, M.B., Ch.B., D.T.M. & H., D.P.H.

E. K. MORRIS, M.B., Ch.B., M.R.C.S., L.R.C.P.

G. J. O'CONNOR, M.B., Ch.B., B.A.O.

MARGARET OSBORNE, M.B., Ch.B. (Appointed 20.9.65)

M. M. L. PASSI, M.B., B.Sc., D.P.H., D.T.M. & H. & D.I.H. (Appointed 23.6.65)

UMA PASSI, M.B.B.S., D.P.H., D.I.H., D.T.M. & H. (Appointed 28.6.65)

J. A. SCULLY, M.A., M.B., Ch.B., B.A.O. (on D.P.H. Course from 1.10.65)

NORA SENIOR, M.B., Ch.B. (Appointed 9.6.65. Resigned 10.12.65)

PATRICIA TYLER, M.B., Ch.B.

R. WHARTON, M.B., Ch.B.

HENRIETTA M. WILSON, M.A., M.B., B.Chir.

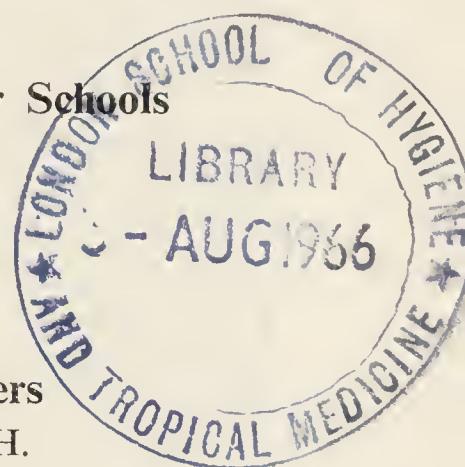
## School Medical Officers holding Joint Appointments

C. R. B. BAMFORD, M.B., B.S., D.P.H. (M.O.H. Stone U.D. & R.D.).

SHEILA M. DURKIN, M.B., B.Ch., D.P.H. (Area Medical Officer and M.O.H. Tutbury R.D. and Uttoxeter U.D. & R.D.).

A. R. KENNEDY, M.B., Ch.B., B.Sc., M.R.C.S., L.R.C.P., D.P.H. (M.O.H. Amblecote U.D., Seisdon R.D. and relief at Willenhall U.D.).

B. NEWTON, M.B., Ch.B., D.Obst., R.C.O.G., D.P.H. (M.O.H. Wednesfield U.D.).



A. G. THOMSON, M.B., Ch.B., D.P.H. (M.O.H. Cannock R.D. & Stafford R.D.).  
 J. TOLLAND, L.R.C.P., L.R.C.S., L.R.F.P.S., D.P.H. (Area Medical Officer Kidsgrove U.D. and Newcastle R.D.).  
 E. H. TOMLIN, M.D., Ch.B., D.P.H. (Area Medical Officer and M.O.H. Cheadle R.D.).  
 J. G. VACCARO, M.B., B.S., D.P.H. (M.O.H. Coseley U.D.).  
 H. E. WILSON, M.B., Ch.B., D.O., D.P.H. (M.O.H. Leek U.D.).

### **Part-Time School Medical Officers**

MARGARET BAMBER, M.B., B.Ch., B.A.O.  
 JEANETTE R. B. GIBSON, L.R.C.P., L.R.C.S., L.R.F.P.S.  
 IVY R. GIFFORD, M.B., Ch.B. (Dental Anaesthetist).  
 MATILDA DOROTHY GODWIN, M.B., B.Ch., B.A.O. (Appointed part-time 6.4.65).  
 ELIZABETH A. LIVINGSTONE, M.B., Ch.B. (Appointed 19.2.65).  
 ROSE MACAULIFFE, M.B., B.Ch., B.A.O.  
 MARGARET W. PETERS, M.B., Ch.B. (Dental Anaesthetist).  
 ELEANOR M. PRENDIVILLE, L.R.C.P.I., L.R.C.S.I., L.M., D.P.H.  
 ZOE RICHARDSON, M.B., B.Ch., B.A.O. (Appointed 1.11.65).  
 E. SMITH, M.B., B.Ch. (Appointed 10.2.65).  
 JUDITH THOMPSON, M.B., Ch.B., D.Obs., R.C.O.G. (Appointed 18.10.65).  
 SHIRLEY J. TOOGOOD, M.B., B.S.  
 G. ISABEL VILLIERS, M.B., B.Ch., B.A.O. (Dental Anaesthetist)  
 LUCY M. WILKIN, M.B., B.Ch., B.A.O.  
 JOAN WRIGHT, M.R.C.S., L.R.C.P. (Appointed 4.2.65).  
 CHRISTINE H. WILLCOX, M.B., B.S., L.R.C.P., M.R.C.S. (Appointed 6.12.65).

### **Principal County School Dental Officer**

J. C. TIMMIS, L.D.S., R.C.S.

### **Area Dental Officers**

J. D. NELSON, L.D.S. (Appointed S.W. Staffordshire Area 1.9.65).  
 D. R. OGDEN, B.D.S., L.D.S., R.C.S. (Appointed S.E. Staffordshire Area 1.9.65).  
 T. C. J. PRICE, B.D.S., D.P.D. (Appointed Mid-Staffordshire Area, 1.9.65).  
 MISS A. P. WOOD, B.D.S. (Appointed N. Staffordshire Area 1.11.65).

### **Whole-time School Dental Officers**

D. C. BUTTERWORTH, B.D.S.  
 DEV DATT, L.D.S., M.B., Ch.B. (Appointed 22.4.65).  
 R. B. DEARNALEY, L.D.S., R.F.P.S. (Resigned 31.7.65).  
 MISS P. ENSUM, L.D.S.  
 S. FORD, L.D.S., R.C.S.  
 B. M. GRIFFITHS, B.D.S.  
 J. HICKEY, B.D.S.  
 MISS M. C. LAUDER, L.D.S., R.C.S.  
 H. W. PRITCHARD, L.D.S.

## Part-time School Dental Officers

R. BOLTON, F.D.S., R.C.S.  
R. J. FOWLER, L.D.S., B.Ch.D., F.D.S., R.C.S. (Resigned 24.9.65).  
N. K. GREEN, B.D.S.  
MRS. C. E. HUGHES, L.D.S.  
J. L. JACQUES, L.D.S., R.C.S.  
G. M. H. LEES, L.D.S. (Appointed 22-2-65)  
L. F. KELLY, L.D.S., R.F.P.S.  
C. L. B. LAVELLE, B.Sc., B.D.S. (Resigned 1.10.65).  
A. C. MILES, L.D.S., R.C.S. (Resigned 31.10.65)  
A. N. PLACE, L.D.S.  
L. H. THOMPSON, L.D.S. (Resigned 15.7.65).  
M. R. L. THORNTON, L.D.S., B.D.S.  
R. WARNER, L.D.S.  
J. K. WILLIAMS, L.D.S.

## Whole-time Dental Auxiliaries

MISS E. M. ANDERSON (Appointed 13.9.65).  
MISS J. M. CLARKE  
MISS E. ELLEMAN (Appointed 13.9.65).  
Mrs. J. E. HARRIS  
MISS J. MORRALL  
MISS A. E. PRICE (Appointed 4.10.65).  
MISS A. J. RAMAGE (Resigned 24.10.65).  
MISS J. RANDLE (Appointed 27.9.65).  
MISS P. A. SPRINGER (Appointed 13.9.65).

## Dental Hygienist

MISS A. P. PRITCHARD, Part time.

## Specialists

PART-TIME CONSULTANT IN CHILDREN'S DENTISTRY:  
H. LEVISON, B.D.S., F.D.S., R.C.S., D.Orth.

PART-TIME OPHTHALMIC SPECIALISTS:

J. A. COX, M.B., B.S., D.O.  
V. L. GOKHALE, M.R.C.S., D.O. (Appointed 7.6.65)  
P. LAMBAH, B.A., M.R.C.S., L.R.C.P., D.O.  
CHARMIAN H. LONGMORE, M.B., Ch.B., M.R.C.S., L.R.C.P.,  
D.O.M.S. (trans. from Warwicks. 1.4.65).  
D. E. LYONS, M.B., Ch.B., D.O. (Resigned 28.10.65).  
E. J. McCABE, M.B., Ch.B., D.O.  
B. M. McOWAN, M.R.C.S., L.R.C.P., M.B., B.S., D.O. (Ldn.).  
\*D. F. WOODHOUSE, B.M., B.Ch., F.R.C.S., M.R.C.S., L.R.C.P.,  
D.O.M.S.

PART-TIME ORTHOPAEDIC SPECIALISTS:

\*J. HIRLENSTEIN, M.D., F.R.C.S.  
M. H. M. HARRISON, Ch.M., M.B., Ch.B., F.R.C.S.

PART-TIME E.N.T. SPECIALISTS:

G. O. CLARK, M.B., Ch.B., F.R.C.S.  
W. D. PATERSON, M.B., Ch.B., F.R.C.S.

PRINCIPAL MEDICAL OFFICER FOR MENTAL HEALTH:

W. JOHNSON, M.R.C.S., L.R.C.P.

CONSULTANT PSYCHIATRIST:

H. B. BAKER, M.B., B.S., M.R.C.S., L.R.C.P., D.P.M.

**PART-TIME CONSULTANT PSYCHIATRIST:**

J. PEDLEY BAKER, M.B., Ch.B., M.R.C.S., L.R.C.P., D.P.M.

\*Attends County Clinics as Regional Hospital Board Officer.

**EDUCATIONAL PSYCHOLOGISTS:**

D. COOKSON, B.A., Dip. Psych.

MRS. M. D. COOKSON, B.A.

H. A. W. HUGHES, M.A. (Cantab.), B.A.Psych. (Appointed 22.3.65, resigned 31.12.65).

MRS. M. I. CHRISTINE SHEPHERD, B.A.

**PART-TIME PSYCHOTHERAPIST:**

Y. LEJEUNE, B.A., Ph.D. (Rand).

**CASEWORK SUPERVISORS (Holding joint appointments):**

K. E. JONES, A.A.P.S.W.

G. KOHLER, B.A., A.A.P.S.W. (Appointed 1.9.65).

D. A. MACDONALD, A.A.P.S.W., Dip. Soc. Sc. (Resigned 31.3.65).

J. H. SPURR, A.A.P.S.W., R.M.N.D., Dip. Soc. Sc.

E. E. STEPHENSON, A.A.P.S.W.

**PSYCHIATRIC SOCIAL WORKERS:**

MISS M. P. COCKIN.

MRS. G. HENGSTENBERG, A.A.P.S.W., Dip. Soc. Sc.

MRS. L. WOOD

**PART-TIME PSYCHIATRIC SOCIAL WORKERS:**

MRS. B. L. FENBY, A.B., M.S.W.

MRS. E. GLASS, A.A.P.S.W.

**AUDIOMETRICIANS:**

MRS. E. GOODWIN, S.R.N. Part-time.

MRS. M. MOSS

**AUDIOLOGY CLINIC:**

MISS M. L. GIBSON, S.R.N., C.M.B., H.V.

**VISION TESTING SURVEY:**

MRS. E. HORTON, S.R.N.

## Medical Auxiliaries

**PHYSIOTHERAPISTS:**

MISS F. M. BARNES, M.C.S.P.

MRS. N. J. LAW, M.C.S.P.

MRS. M. LEWIS, M.C.S.P. Part-time.

**SENIOR SPEECH THERAPIST:**

MISS H. M. BINKS, L.C.S.T.

**SPEECH THERAPISTS:**

MISS A. J. CHANDLER, L.C.S.T. (Appointed 1.3.65, resigned 31.5.65).

MRS. S. EDWARDS, L.C.S.T. Part-time.

MRS. A. M. PRICE, L.C.S.T.

MRS. S. R. RUMBLE, L.C.S.T.

MRS. J. D. STEWART, L.C.S.T. Part-time (Appointed 26.5.65).

MRS. G. M. STUFFINS, L.C.S.T. Part-time.

MRS. J. L. WILSON, L.C.S.T. Part-time (Resigned 28.2.65).

## SUMMARY OF ASSISTANT STAFF

Staff	Establish- ment	No. Employed on 31.12.65	Equivalent in terms of Whole-time Staff
School Medical Officers	22	44	19.1
School Dental Officers	33	27	19.3
Anaesthetists	—	5	1.1
Ophthalmic Specialists	—	7	1.4
E.N.T. Specialists	—	2	0.4
Orthopaedic Specialists	—	2	0.05
Physiotherapists	5	3	2.5
Speech Therapists	6	6	4.2
School Nurses	40	134	32.2
Clinic Nurses	—	48	25.15
Lay Hygiene Assistants	3	3	2.5
Dental Surgery Assistants	30	37	27.05
Dental Technicians	4	4	4.0
Dental Technician Apprentices	2	—	—
Dental Auxiliaries	8	7	7.0
Dental Hygienists	2	1	0.7
Clerks	24	21	21
Audiometrists	1.2	2	1.2
Vision Testing Survey Nurse	1	1	1
New Cross Diagnostic Clinic			
Nurse	1	1	1
Chiropodists	3	29	2.85

## GENERAL INFORMATION

	Urban Areas	Rural Areas	Admin. County
Estimated civilian population of Administrative County (Mid. 1965)	809,010	263,630	1,072,640
Acreage	104,993	582,805	687,798
Density of population per acre	7.71	0.45	1.55
Mean area per person in acres	0.13	2.21	0.64

1. Estimated School Population of Administrative County (excluding Newcastle)	...	...	...	...	155,951
2. Average attendances (excluding Newcastle)	...	...	...	...	141,916
3. School Population of Newcastle Excepted District	...	...	...	...	13,557
4. Average attendances (Newcastle only)	...	...	...	...	12,390
5. Number of schools and departments in the County (excl. Newcastle):—					
Nursery Schools	...	...	...	...	12
County Primary Schools	...	...	...	...	322
Voluntary Primary Schools	...	...	...	...	206
County Secondary Modern Schools	...	...	...	...	84
Voluntary Secondary Modern Schools	...	...	...	...	7
County Secondary Grammar and High Schools	...	...	...	...	24
Comprehensive Schools	...	...	...	...	14
Special Schools—Residential	...	...	...	...	7
Day	...	...	...	...	4
Hospital	...	...	...	...	1
	Total	...	...	...	681

# Annual Report for 1965

## INSPECTIONS AND OTHER EXAMINATIONS

**Table 1. Medical Inspection of pupils attending Maintained and Assisted Primary and Secondary Schools (including Nursery and Special Schools).**

*A. Periodic Medical Inspections:*

Age Groups Inspected (by year of birth)	Number Examined
1961 and later	589
1960	7,390
1959	9,099
1958	2,969
1957	487
1956	242
1955	164
1954	798
1953	4,946
1952	2,397
1951	1,513
1950 and earlier	7,416
<hr/>	<hr/>
Total	38,010
<hr/>	<hr/>

*B. Number of Other Inspections:*

Special Inspections	248
No. of Re-inspections	19,798
Total	20,046

Children in the "Intermediate" age group are examined in their first year of secondary education. Consequently, in secondary schools, School Medical Officers combine, in one group of visits, the examination of both the "Leaver" and "Intermediate" age groups.

"Entrant" children are medically examined routinely during the summer Term.

C. Pupils found to require treatment at Periodic Medical Inspections (excluding Dental Diseases and Infestation with Vermin).

<i>Age groups Inspected By year of birth</i>	<i>For defective vision (excl. Squint)</i>	<i>For any other conditions</i>	<i>Total of Individual Pupils</i>
1961 and later ...	6	63	66
1960... ...	296	1,075	1,321
1959... ...	440	1,447	1,806
1958... ...	162	508	643
1957... ...	33	68	100
1956... ...	18	45	57
1955... ...	15	31	41
1954... ...	85	112	188
1953... ...	565	516	1,038
1952... ...	294	283	546
1951... ...	208	171	358
1950 and earlier...	893	578	1,368
<hr/>		<hr/>	
Totals ...	3,015	4,897	7,532

The total of individual pupils found to require treatment increased from 7,149 in 1964 to 7,532 in 1965.

Table 2(a). Defects found by Periodic Medical Inspections.

Defect Code No.	Defect or disease	Periodic Inspections			
		Entrants	Leavers	Others	Total
4	Skin .. .. .. .. T 214	214	160	258	632
5	.. .. .. .. O 364	364	156	235	755
	Eyes—(a) Vision .. .. T 691	691	1,075	1,133	2,899
	(b) Squint .. .. O 406	406	501	439	1,346
6	(c) Others .. .. T 380	380	34	159	573
	.. .. .. .. O 69	69	34	41	144
	.. .. .. .. T 51	51	26	39	116
7	.. .. .. .. O 68	68	103	115	286
	Ears—(a) Hearing .. .. T 160	160	27	86	273
	(b) Otitis Media .. .. O 234	234	45	146	425
8	(c) Other .. .. T 141	141	45	79	265
	.. .. .. .. O 294	294	41	187	522
	.. .. .. .. T 20	20	9	19	48
9	.. .. .. .. O 48	48	14	26	88
	Nose and Throat .. .. T 482	482	63	215	760
	.. .. .. .. O 1,937	1,937	237	877	3,051
10	Speech .. .. .. .. T 183	183	15	80	278
11	.. .. .. .. O 300	300	30	85	415
12	Lymphatic Glands .. .. T 48	48	5	21	74
13	.. .. .. .. O 505	505	47	211	763
	Heart .. .. .. .. T 102	102	44	44	190
	.. .. .. .. O 201	201	50	104	355
14	Lungs .. .. .. .. T 233	233	54	112	399
15	.. .. .. .. O 591	591	134	274	999
	Development—(a) Hernia .. .. T 33	33	8	23	64
	(b) Other .. .. O 29	29	3	17	49
16	.. .. .. .. T 44	44	22	60	126
	.. .. .. .. O 342	342	28	136	506
	.. .. .. .. T 50	50	30	44	124
17	.. .. .. .. O 78	78	106	139	323
	Orthopaedic—(a) Posture .. .. T 285	285	95	232	612
	(b) Feet .. .. O 378	378	166	313	857
18	(c) Other .. .. T 162	162	78	95	335
	.. .. .. .. O 242	242	117	138	497
	.. .. .. .. T 29	29	11	23	63
19	.. .. .. .. O 22	22	6	26	54
	Nervous System—(a) Epilepsy .. .. T 39	39	17	25	81
	(b) Other .. .. O 80	80	60	132	272
20	.. .. .. .. T 30	30	15	54	99
	.. .. .. .. O 109	109	29	120	258
	.. .. .. .. T 37	37	20	34	91
21	.. .. .. .. O 349	349	75	213	637
	Psychological—(a) Development .. .. T 46	46	9	23	78
	(b) Stability .. .. O 85	85	18	61	164
22	.. .. .. .. T 194	194	95	182	471
	.. .. .. .. O 787	787	142	369	1,298
	.. .. .. ..				
TOTAL NUMBER OF DEFECTS REQUIRING TREATMENT .. .. ..		3,654	1,957	3,040	8,651
TOTAL NUMBER OF DEFECTS NEEDING TO BE KEPT UNDER OBSERVATION		7,518	2,142	44,04	14,064
TOTAL DEFECTS .. .. .. ..		11,172	4,099	7,444	22,715

Defects requiring treatment found at routine medical examination increased and a total of 8,651 defects was found to require treatment as compared to 7,643 in the previous year. Defects requiring continued observation, although treatment was not immediately required, also increased from 12,366 in the previous year to 14,064 this year.

Compared with 1964 the total number of defects requiring observation or treatment increased by 2,706.

The greater numbers of children requiring treatment were the main feature of the findings. The principal increases were eye defects (345), orthopaedic conditions (176), ear conditions (131), speech conditions (10), and heart conditions (61).

Table (2b). Defects found by Medical Inspection  
Special Inspections

Defect or Disease	SPECIAL INSPECTIONS		
	Defects requiring Treatment	Defects requiring Observation	
Skin	7		5
Eyes—(a) Vision	37		30
(b) Squint	3		1
(c) Other...	—		2
Ears—(a) Hearing	7		7
(b) Otitis Media...	7		6
(c) Other...	—		—
Nose and Throat	11		31
Speech	5		4
Lymphatic Glands	—		3
Heart	2		10
Lungs	8		7
Development—			
(a) Hernia	—		2
(b) Other...	4		—
Orthopaedic—			
(a) Posture	1		2
(b) Feet ...	6		8
(c) Other...	3		1
Nervous System—			
(a) Epilepsy	2		2
(b) Other...	—		1
Psychological—			
(a) Development	6		4
(b) Stability	1		4
Abdomen ...	3		—
Other	5		16
<b>TOTALS</b>	<b>118</b>		<b>146</b>

The comparable figures for the previous year were 111 defects requiring treatment and 86 defects requiring to be kept under observation.

## Routine Medical Inspections

The following information has been extracted from a report received from a School Medical Officer regarding routine medical inspections in schools during the year.

"In looking back over 50 years I appreciate the amazing wealth of improvements both in school premises, furnishings, playing fields, etc., and general health.

Because of better social, environmental and economic conditions, less industrial depression with its resultant hardships, introduction of N.H.S. with its many facilities; free meals for pupils when necessary, the standard of health has risen to a high level.

Early diagnosis of defects mental and physical, hearing, etc., get early advice and treatment from a multitude of services especially from Paediatricians, orthopaedists, Eye and E.N.T. specialists, etc. No one person can give 100% care so credit goes to the many involved, psychiatrists, mental health workers, etc.

With the increasing emotional and behaviour problems the Child Guidance Clinics are an increasingly important facet of services available, also nursery schools to give such young children an early chance to re-adjust themselves and have the company of other children in a friendly atmosphere.

Minor ailment clinics are no longer busy as such and one can but hope that all this sums up to a 'mens sana in corpore sano.' Yet the lowering of moral standards, acquisitiveness (to be up with the Joneses), and increase in delinquency gives one a good deal of food for thought."

**Table 3. Parents attending Periodic Medical Inspections**

		No. of Children Examined	No. of Parents Attended	Percentage of Parents who Attended
Entrants	1961 and later	589	511	86.8
	1960	7,390	6,809	92.1
	1959	9,099	8,130	89.4
	1958	2,969	2,579	86.9
	1957	487	406	83.4
	1956	242	177	73.1
2nd Age Group	1955	164	104	63.4
	1954	798	341	42.7
	1953	4,946	2,439	49.3
	1952	2,397	1,105	46.1
3rd Age Group	1951	1,513	243	16.1
	1950 and earlier	7,416	1,167	15.7
Totals		38,010	24,011	63.2

Whilst the number of children examined rose by 5,623, compared with 1964, 6,357 more parents attended and the percentage of parents attending rose from 54% in 1964 to 63% in 1965.

**Table 4. Handicapped Children**

<i>Category</i>	<i>No. of Children newly found during the year</i>
Blind	2
Partially Sighted	5
Deaf	13
Partially Hearing	32
Delicate	23
Educationally Sub-Normal	229
Epileptic	31
Maladjusted	262
Physically Handicapped	143
	740

The table above does not include children living in the Excepted District of Newcastle. Almost all the children were examined at the school clinics.

**Table 5. Notification of Handicapped Pupils leaving school to the Youth Employment Service**

No. of children who were advised not to take up certain types of employment	777
No. of children advised to register under the Disabled Persons (Employment) Act 1944	37
	814

A report giving an indication of the type of work for which a child is suitable is issued for each child examined in the "leaver" group for the information of the Youth Employment Service and in addition to the figures in table 5 above reports were issued in respect of 5,943 leavers whose condition was found to be normal.

The arrangement for consultation of the School Medical Officers with the Area Youth Employment Committees prior to committee meetings still continues. In difficult cases the Medical Officer may attend the Committee as an advisor.

It is pleasing to note that certain Youth Employment Officers have stated they have found the medical reports submitted to be most helpful in the correct placing of children. It is regrettable that so many children on leaving school have some type of handicap—albeit a minor one. but they are given effective help in making their way in life. The number of children referred this year shows a decrease of 402 compared with 1964.

**Table 6. Miscellaneous Examinations at School Clinics**

<i>Type of Examination</i>					
Employment Licences	...	...	...	...	1,810
Entrants to courses of training for Teachers (4 R.T.C.)	...	...	...	...	523
Entrants to the Teaching Profession (28 R.Q.)					283
Children boarded out by the Children's Committee	...	...	...	...	343
Adventure Courses	...	...	...	...	196
					<hr/>
					3,155

All of the examinations were carried out by School Medical Officers at the school clinics and have taken up a good proportion of the time devoted to attendance at the clinics.

The number of employment licence examinations includes only three children who were found to be unfit to undertake part-time employment.

### Home Visiting

**Table 7. Details of home visits made by Nursing Staff**

<i>Reason for Visit</i>		<i>No of Visits</i>
Uncleanliness and verminous cases	...	3,235
Arising out of medical inspections	...	857
Arising out of inspection at clinics	...	537
All skin diseases	...	288
Aural:—Ears	...	344
Nose and throat conditions	...	742
Ophthalmic defects	...	2,662
Orthopaedic defects	...	239
Educationally subnormal children	...	419
Neglected children	...	751
Infectious diseases	...	165
Heaf testing	...	94
National Survey (Health & Development)	...	330
Holiday visits to children home		
from special schools	...	174
Miscellaneous	...	3,079
Ineffectual visits	...	2,171
		<hr/>
		16,087

There was a decrease of 92 in the number of home visits made by the nurses as compared with last year.

The most important increase was concerned with the assistance given to the National Child Development study.

Much useful work was also done with home visiting of neglected children. The visitation of children in their homes is an important part of the school nurses's work, for by this it is ensured that children obtain treatment which has been recommended.

**Table 8. Details of visits to schools made by Nursing Staff.**

<i>Reasons for Visit</i>						<i>No. of Visits</i>
Ophthalmic Cases:—						
General	...	...	...	...	...	1,266
To administer atropine						143
Vision testing prior to:—						
Medical inspection	...	...	...	...	...	1,065
Attendance at Ophthalmic Clinics						88
Infectious Diseases	...	...	...	...	...	81
Hygiene inspections (excluding feet)						3,122
Foot Inspections (half days)	...	...	...	...	...	1,377
Miscellaneous	...	...	...	...	...	531
						7,673

It will be seen from these figures that the nurses are required to devote a considerable amount of time to work in schools. The majority of the visits were in connection with general hygiene inspections of heads, hands and feet. The nurses make routine visits to schools each term to supervise the cleanliness of the children, further details of which are to be found on page 70.

In addition the nurses attend with the School Medical Officers to assist at routine medical inspections.

The number of visits to schools, when compared with the previous year, shows a decrease of 245 visits, and this was largely due to an increase in foot inspections by chiropodists instead of by nurses.

## TREATMENT

**Table 9. Details of treatment given**

*Eye Diseases, Defective Vision and Squint*

	Number of cases dealt with		
	By the Authority	Otherwise (Hospital, etc.)	
External and other, excluding errors of refraction and squint	120	87	
Errors of refraction (incl. squint)	2,685	128	
<b>Total</b>	<b>2,805</b>	<b>215</b>	
Number of pupils for whom spectacles were prescribed	4,333	n/k	

*Diseases and Defects of Ear, Nose and Throat*

	<i>No. of cases known to have been dealt with</i>		
Received operative treatment	—	—	—
(a) for diseases of the ear	...	...	—
(b) for adenoids and chronic tonsilitis	...	...	1,522
(c) for other nose and throat conditions	...	...	95
Received other forms of treatment	568	568	—
<b>Total</b>	<b>2,185</b>	<b>2,185</b>	<b>—</b>

Total number of pupils in schools who are known to have been provided with hearing aids ...

(a) in 1965	...	...	...	21
(b) in previous years	...	...	...	118
	<b>139</b>	<b>139</b>	<b>—</b>	

*Orthopaedic and Postural Defects*

No. of cases known  
to have been dealt with

Number treated as in-patients in hospitals ...	...	...	...	188
Number treated otherwise, <i>e.g.</i> in clinics or out-patients departments	...	...	...	1,066
Number treated at school for postural defects	...	...	...	48
				1,302

## *Diseases of the Skin*

## *Child Guidance Treatment*

Number of pupils treated at Staffordshire Child Guidance Clinics	...	...	...	449
Number of pupils treated by other LEA's	...	...	...	13
Number of pupils treated at Hospitals	...	...	...	—
Total number of pupils who had Child Guidance	...	...	...	462

*Speech Therapy*

Number of pupils treated by Speech Therapists at Stafford- shire Clinics	...	...	...	906
Number of pupils treated at other LEA's clinics	...	...	...	5
Number of pupils treated at N.H.S. Hospitals	...	...	...	39
				950

*Other Treatment Given*

Chiropody	...	...	...	9,956
Miscellaneous minor ailments	...	...	...	574
Respiratory defects	...	...	...	531
Injuries	...	...	...	1,231
Debility and malnutrition	...	...	...	254
Infectious diseases	...	...	...	124
Abdominal defects	...	...	...	469
Heart conditions	...	...	...	186
Rheumatism	...	...	...	17
Other	...	...	...	1,077
				14,419

Pupils who had a period of con- valescence under School Health Service arrangements	...	...	...	175
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Pupils who received B.C.G. Vaccination	...	...	...	12,882
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Table 10.

SCHOOL HEALTH SERVICE CLINICS  
(Less the Excepted District of the Borough of Newcastle)  
as at 31-12-65

Name of Clinic	Address	Minor Ailments Clinic held	Dental Clinic held	Ophthalmic Clinic held	Speech Therapy Clinic held	Remedial Exercises Clinic held
Aldridge	‡ Leighswood Road (Tel. Aldridge 52088)	9-0—10-30 Wed. weekly	9-0—5-0 Daily (Not Sats.)	9-30—12-30 Wed. Weekly	9-30—12-30 Tues. & Thurs.	9-0—12-30 Fri. fortnightly
Ashley	Memorial Hall Ashley Road, off Newcastle Road	2-0—2-30 Tues. fortnightly	—	—	—	—
Audley	District Council Office (Tel. Audley 527)	2-0—2-30 Tues. weekly	—	—	—	—
Barton-under-Needwood	Central Hall	2-0—2-30 Tues. fortnightly	—	—	—	—
Bentley	Churchill Road (Tel. Walsall 24024)	9-0—10-30 Fris. weekly (S.M.O. attends every 4th week)	—	—	—	—
Biddulph	Princess Street (Tel. Biddulph 2040)	9-0—10-30 Fri. weekly	—	—	*	9-30—12-30 (N.P.)
Bilston	‡ Centre Health Clinic Wellington Road (Tel. Bilston 43881)	9-0—10-30 Daily inc. Sat. SMO attends Mons. f'tnly and Thurs. wkly.	Daily 9-0—5-0 (Not Sats.)	1-30—4-0 Mon. weekly	9-30—12-30 Tues. Weds. & Thurs.	9-0—4-30 Fridays
Brewood	Dr. Cheshire's Surgery Sandy Lane (Tel. Brewood 206)	9-0—10-30 Wed. monthly	—	—	1-30—4-0 Thurs. once a term	—

Name of Clinic	Address	Minor Ailments Clinic held	Dental Clinic held	Ophthalmic Clinic held	Speech Therapy Clinic held	Remedial Exercises Clinic held
Brierley Hill	Cottage Street (Tel. Brierley Hill 78226)	9-0—10-30 Tues. weekly	9-0—5-0 Daily (not Sats.)	9-30—12-30 Mon. weekly 9-30—5-0 monthly	—	(N.P.)
Brownhills	36 Pier Street (Tel. Brownhills 2219)	9-0—10-30 Tues. fortnightly	Daily 9-0—5-0 (Not Sats.)	—	9-30—4-30 Mons. 1-30—4-30 Thurs.	9-0—12-30 Fri. fortnightly
Cannock	† (1) Beecroft Road Church Street (Tel. Cannock 3715)	9-0—10-30 Mon and Thurs. wkly.	—	1-30—4-30 Friday weekly	—	†
	(2) Arthur Street, Chadsmoor (Tel. Cannock 2347)	9-0—10-30 Weds. fortnightly	9-0—5-0 daily	—	9-30—4-30 Fridays	—
	(3) Cannock Rd., Hednesford (Tel. Hednesford 228)	9-0—10-30 Wed. weekly	—	—	—	—
Chasetown	(D.N.) Salters Meadow Group Practice Centre Sankey's Corner (Tel. Burntwood 218)	9-0—10-30 Tues. weekly	—	—	—	—
Cheadle	Well Street (Tel. Cheadle 2006)	9-0—10-30 Tues. fortnightly	9-0—5-0 daily (not Sats.)	* —	1-30—4-30 Thursdays	(N.P.)
Cheddleton	Parish Institute	1-30—2-0 Fri. fortnightly	—	—	—	—
Cheslyn Hay	Junior School Hatherton Street (Tel. Cheslyn Hay 398)	9-0—10-30 Mon. fortnightly	—	—	—	—
Codsall	Elliotts Lane (Tel. Birches Bridge 738)	9-0—10-30 Tues. fortnightly	9-0—5-0 daily (not Sats.)	9-30—12-30 Weds. monthly	9-30—4-30 Wednesday	—
Coseley	Bayer Hall (Tel. Sedgley 2306)	9-0—10-30 Mon., Wed. and Fri.	9-0—5-0 Tues. & Thurs.	9-30—12-30 Mons. & Tues. monthly	—	—

Name of Clinic	Address	Minor Ailments Clinic held	Dental Clinic held	Ophthalmic Clinic held	Speech Therapy Clinic held	Remedial Exercises Clinic held
Darlaston	Bilston Street (Tel. James Bridge 2923)	9-0—10-30 Mon. and Thurs. weekly	9-0—5-0 daily (not Sats.)	9-30—12-30 Tuesday fortnightly	—	—
Eccleshall	Methodist School Stone Road	9-0—9-30 Fri. fortnightly	—	—	—	—
Essington	Methodist Sunday School Essington Wood	2-0—2-30 Wed. fortnightly	—	—	—	—
Featherstone	United Methodist Chapel	9-0—10-30 Fri. weekly	—	1-30—4-30 Thurs. once a term	—	—
Great Wyrley	(1) Great Wyrley Junior School (2) The Hutments No. 1, Walsall Road	9-0—10-30 Wed. fortnightly 10-30—12-0 Wed. fortnightly	—	—	—	..
Halmerend	Central Methodist School High Street	1-30—2-0 Wed. fortnightly	—	—	—	—
Harriseahead	Methodist Memorial Chapel High Street	2-0—2-30 Tues. fortnightly	—	—	—	—
Huntington	Junior School Stafford Road Huntington (Tel. Cannock 2115)	9-0—10-30 Thurs. fortnightly	—	—	—	—
Kidsgrove	‡ Day Nursery Liverpool Road (Tel. Kidsgrove 2289)	9-0—10-30 Mon. fortnightly	—	9-30—12-30 Wed. fortnightly (approx.)	—	—
Kingswinford	Standhills Road (Tel. Kingswinford 4940)	9-30—10-30 Tues. fortnightly	—	1-30—4-30 Mons. once a month	9-30—12-30 Tuesdays	1-45—4-45 Thursday
Kinver	Constitutional Club High Street	9-0—10-30 2nd Fri. in month	—	—	—	—

Name of Clinic	Address	Minor Ailments Clinic held	Dental Clinic held	Ophthalmic Clinic held	Speech Therapy Clinic held	Remedial Exercises Clinic held
Leek	‡ Cripples' Aid Society Clin.c. Salisbury Street (Tel. Leek 1313)	9-0—10-30 Mon. weekly Thurs. fortnightly	9-0—5-0 daily	9-30—5-0 Wed. fortnightly	1-30—4-30 Tues. weekly	‡ Mons., Weds., Fris. (R.H.B. Clinic)
Lichfield	(1) Sandford Street (Tel. Lichfield 2246) (2) Red Court House Tamworth Street (Tel. Lichfield 3656)	—	Daily 9-0—5-0 (Not Sats.)	—	9-30—12-30 Tues. & Fri.	—
		9-0—10-30 Wed. fortnightly	—	9-30—12-30 Fri. weekly and Tues. 1-30—4-30 monthly	—	—
Lower Gornal	Bull Street (Tel. Dudley 53175)	9-0—10-30 Fri. fortnightly	—	—	9-30—12-30 Wednesday	9-0—12-30 weekly Tuesday
Madeley	Village Hall	9-0—10-30 Thurs. fortnightly	—	9-30—12-30 Weds. monthly	—	—
Norton Canes	Community Centre Brownhills Road	10-45—12-0 Mon. fortnightly	—	—	—	—
Pelsall	(D.N.) New Clinic High Street (Tel. Pelsall 2781)	9-0—10-30 Mon. fortnightly	—	—	1-30—4-30 Wednesday	—
Penkridge	Dr. McCullum's Surgery St. Michaels Road (Tel. Penkridge 300)	9-0—10-30 Thurs. fortnightly	—	—	—	—
Pheasey	‡ Beacon Road Pheasey Estate Birmingham 22a (Tel. Gt. Barr 2663)	9-0—10-30 Tues. weekly	9-0—5-0 daily (not Sats.)	—	1-30—4-30 Weds. monthly Fri. occasionally	—
Quarry Bank	Woodthorne Court Sheffield Street	9-0—10-30 Mon. fortnightly	9-30—12-30 Mons. 9-0—5-0 Tues., Thurs. & Fri.	—	—	—
Rolleston	Commemoration Hall	1-30—2-0 Wednesdays 1st and 3rd in month	—	—	—	—

Name of Clinic	Address	Minor Ailments Clinic held	Dental Clinic held	Ophthalmic Clinic held	Speech Therapy Clinic held	Remedial Exercises Clinic held
Rowley Regis	‡ (1) Carlyle Road, Blackheath (Tel. Blackheath 1334)	9-0—10-30 Mon. fortnightly	*	—	—	1-45—4-45 Mons. weekly
	‡ (2) Mace Street, Old Hill (Tel. Crad. Heath 66806)	9-0—10-30 Tues. weekly	*	—	—	9-0—12-30 Mons. & Thurs. weekly
	‡ (3) Elm Terrace Tividale Hall Estate, Nr. Dudley (Tel. Dudley 54979)	9-0—10-30 Mon. fortnightly	*	—	—	1-45—4-45 Wednesday
	(4) Harvest Road Brickhouse Farm Estate Springfield (Tel. Blackheath 2274)	2-0—2-30 Thurs. fortnightly	—	—	—	—
Rugeley	Congregational Sunday School, Heron Court	9-0—10-30 Mon. weekly	—	—	1-45—4-45 Thurs. weekly	9-30—12-30 Thursday
Sedgeley	(1) Bleak House, 81 Dudley Road (Tel. Sedgley 2192) (2) Quadrant (Tel. Sedgley 3048)	9-0—10-30 Tues. fortnightly 9-0—10-30 Wed. fortnightly	—	—	9-30—12-30 Tues. fortnightly —	—
Shelfield	Coal Heath Lane off Lichfield Road (Tel. Pelsall 2279)	9-0—10-30 Thurs. fortnightly	—	—	—	1-30—4-30 Tues. weekly
Short Heath	Bloxwich Road North (Tel. Bloxwich 76146)	9-0—10-30 Fri. weekly	—	—	—	9-30—12-30 Wednesday
Stafford	‡ (1) Lammascote Road (Tel. Stafford 3950) (2) North Walls (Tel. Stafford 2301) (3) Rising Brook off John Amery Drive (Tel. Stafford 3372)	9-0—10-30 Daily inc. Sat. except Tues. —	9-0—5-0 Daily except Sats. except Tues. —	9-30—12-30 Tues. 1-30—4-30 Wed. alternate weeks —	—	9-0—12-30 Thurs. weekly

Name of Clinic	Address	Minor Ailments Clinic held	Dental Clinic held	Ophthalmic Clinic held	Speech Therapy Clinic held
Stone	‡ St. Michael's Hall	9-0—10-30 Thurs. weekly	—	1-30—4-30 Mons. monthly	—
Talke	Cross House (Tel. Kidsgrove 2998)	9-0—10-30 Thurs. weekly	—	—	—
Tamworth	School of Industry Marlton Street (Tel. Tamworth 2197)	9-0—10-30 Thurs. weekly	9-0—5-0 Tuesdays	9-30—12-30 Tues. fortnightly	9-30—12-30 Friday
Tettenhall	U.D.C. Offices, Upper Green (Tel. W'ton 51536)	9-0—10-30 Thurs. fortnightly	—	9-30—12-30 Wed. fortnightly	—
Tipton	‡ (1) Central Clinic, Horseley Road (Tel. Tipton 1949) (2) Birch Street (Tel. Tipton 2907)	9-0—10-30 daily incl. Sat. 9-0—10-30 Tues. weekly	—	9-30—12-30 Weds. weekly	9-30—4-30 Friday
Tutbury	(1) Methodist Sunday School (2) Tutbury Institute	1-30—2-0 Fri. fortnightly	—	—	—
Uttoxeter	Heath House (Tel. Uttoxeter 2555)	9-0—10-30 Fri. weekly	—	9-30—12-30 Thurs. termly approx.	—
			1-30—4-30 Mons. & Tues. 9-30—12-30 Weds. & Thurs.	9-30—12-30 Wed. fortnightly	9-30—12-30 Thursday
Walsall Wood	Primitive Methodist School, Lichfield Road	9-0—10-30 3rd Wed. each month	—	—	—
Wednesbury	(1) Technical School, Albert Street (Tel. Wednesbury 0215) (2) School Street, King's Hill (Tel. James Bridge 2987)	9-0—10-30 Mon. & Fri. (N) weekly 9-0—10-30 Tues. (N) & Fri. weekly	—	—	—
	‡ (3) Mesty Croft (Tel. Wednesbury 0020)	9-0—10-30 Mon. & Thurs. weekly	—	—	—
<i>Remedial Exercises Clinic held</i>					

Name of Clinic	Address	Minor Ailments Clinic held	Dental Clinic held	Ophthalmic Clinic held	Speech Therapy Clinic held	Remedial Exercises Clinic held
Wednesfield	(1) Alfred Squire Road (Tel. W'ton 32381)	9.0—10.30 Tues. weekly	—	—	9.30—12.30 Fridays fortnightly	—
	(N) (2) Wards Bridge Sec. Mixed School (Tel. W'ton 32408)	9.0—10.30 Mons. weekly	—	—	—	—
	(3) 49, Olinthus Avenue	—	—	9.30—12.30 Mons. weekly	—	—
Werrington	Village School Hall	9.0—10.30 Wed. monthly	—	—	—	—
Willenhall	‡ Nurses Home, 32 Walsall Street (Tel. Willenhall 65638)	9.0—10.30 Mon. weekly	—	—	1.30—4.30 Mon. fortnightly	—
	Parish Room	—	—	—	—	—
28	Wilnecote	9.0—12.0 2nd Thurs. in each month	—	—	2.15—4.30 Tues.	—
	Mill Lane (Tel. Wombourn 2495)	9.0—10.30 Tues. fortnightly	—	—	9.30—12.30 Weds. monthly	—
	Primitive Methodist Sunday School. New Street	9.0—10.30 Mon. fortnightly	—	—	9.30—4.30 Friday	—

\* Clinics are also held on these premises as and when necessary.

† An Orthopaedic and Physiotherapy Clinic is also held daily from 9.0—5.0 except Saturday.

‡ Ultra Violet Light Clinics held on these premises once or twice weekly.

(N) No Doctor. Nurse only in attendance at M.A.C.

(D.N.) Doctor's Clinic alternating with Nurses' Clinic.

For details of Child Guidance Clinics please see page 42.

(N.P.) Remedial Exercise Clinic staffed by a nurse who is not a qualified physiotherapist. Baddeley Green and Weston Coyney clinics were transferred to Stoke City, and Wilnecote clinic was transferred from Warwickshire to Staffordshire on 1st April, 1965

**Table 11. Summary of Clinics**

<i>Kind of Clinic</i>				<i>Number of premises used by Authority</i>	<i>No. of premises used under R.H.B. arrangements</i>
Dental	...	...	...	* 32	1
Minor Ailment	...	...	...	70	—
Ophthalmic	...	...	...	33	1
E.N.T.	...	...	...	28	—
Orthopaedic	...	...	...	1	1
Speech Therapy	...	...	...	22	—
Physiotherapy	...	...	...	14	—
Remedial Exercises	...	...	...	16	—
Breathing Exercises	...	...	...	3	—
U.V.L.	...	...	...	9	—
Chiropody	...	...	...	66	—
Audiology	...	...	...	—	1
Diagnostic Units—(a) Partially hearing				1	—
(b) Mentally handicapped				1	—

\* includes six mobile clinics.

**Table 12. Minor Ailments Clinics**

		1965	1964
No. of Clinics	...	...	72
No. of first visits	...	...	5,724
No. of re-visits	...	...	12,911

The children, attending minor ailment clinics for the first time, were found to have 6,030 conditions requiring treatment compared to 6,585 conditions in the previous year.

The School Medical Officers also carried out the examinations detailed in Tables 4 and 6 on pages 16 and 17 at School Clinics generally after the minor ailment clinic had been held.

**Table 13. Diseases and Defects found at Minor Ailment Clinics**

	<i>Disease or Defect</i>			
Defective vision	...	...	...	666
Squint	...	...	...	31
Blepharitis	...	...	...	33
Conjunctivitis	...	...	...	32
Styes	...	...	...	97

Other eye defects ...	...	...	...	75
Enlarged tonsils and/or adenoids	...	...	...	68
Other defects of nose and throat	...	...	...	49
Defective hearing	...	...	...	85
Otitis media	...	...	...	27
Other defects of ears	...	...	...	71
Speech defects	...	...	...	80
Cough or catarrh	...	...	...	46
Bronchitis	...	...	...	39
Asthma	...	...	...	30
Ringworm—Body	...	...	...	2
Scalp	...	...	...	1
Scabies	...	...	...	15
Impetigo	...	...	...	50
Septic sores	...	...	...	281
Warts—General	...	...	...	321
Plantar	...	...	...	1,562
Boils	...	...	...	73
Other skin defects	...	...	...	292
Major injuries (including fractures)	...	...	...	15
Burns	...	...	...	61
Sprains or strains	...	...	...	161
Other minor injuries	...	...	...	571
Heart conditions	...	...	...	24
Rheumatic conditions	...	...	...	8
Debility and malnutrition	...	...	...	254
T.B. Glands—Cervical	...	...	...	1
Abdominal	...	...	...	7
Posture	...	...	...	14
Flat feet	...	...	...	108
Other orthopaedic defects	...	...	...	158
Other defects	...	...	...	574
				6,030

**Table 14. Bilston Foot Clinic**

No. of new cases of plantar warts treated	376
No. of treatments ...	1,667
No. of sessions ...	128
No. of children on waiting list ...	31

**Table 15. Ophthalmic Clinics**

**Visual and External Eye Defects**

No. of children examined	...	...	...	...	8,894
No. of children attending for the first time					2,707
No. of re-visits	...	...	...	...	6,187
No. of children for whom spectacles were prescribed	...	...	...	...	4,333

Analysis of major defects found among new cases:—

*Errors of Refraction:—*

Hypermetropia	...	..	..	..	222
Hypermetropic astigmatism	...	..	..	..	343
Compound hypermetropic astigmatism					115
Myopia	..	..	..	..	635
Myopic astigmatism	..	..	..	..	226
Compound myopic astigmatism					120
Mixed astigmatism	..	..	..	..	109
Anisometropia	..	..	..	..	322

*Diseases and abnormalities:—*

*Globe:—*

Microphtalmos	..	..	..	..	2
---------------	----	----	----	----	---

*Lids and conjunctiva:—*

Blepharitis	..	..	..	..	5
Ptosis	..	..	..	..	5
Epicanthus	..	..	..	..	25
Amblyopia	..	..	..	..	40
Blocked tear duct	..	..	..	..	1
Hordeoli	..	..	..	..	2
Chalazion	..	..	..	..	1

*Cornea:—*

Nebulae of cornea	..	..	..	..	2
Corneal scars	..	..	..	..	2

*Uvea (choroid and iris)*

Albinism	..	..	..	..	2
Congenital coloboma of choroid	..	..	..	..	2
Toxoplasmosis	..	..	..	..	1

*Lens:—*

Posterior Polar cataract	..	..	..	..	5
Aphakia	..	..	..	..	1

*Retina:—*

Detachment of retina	..	..	..	..	1
Exophoria	..	..	..	..	6
Papilloedema	..	..	..	..	3

*Muscles:—*

Nystagmus	..	..	..	..	2
Strabismus	..	..	..	..	232
Exophoria	..	..	..	..	6
Convergent deficiency	..	..	..	..	2
Torticollis	..	..	..	..	2
Rectus palsy	..	..	..	..	2

The staff has worked continuously throughout the year but there are still one or two clinics which have waiting lists.

The total number of children examined was 583 less than in the previous year and the number of re-visits decreased by 395.

The system has continued whereby a school nurse is engaged whole time in testing the vision of the 8 year age group, 10,698 children were examined, 1,485 were found to have defective vision of whom 404 were already under treatment and supervision. Nearly all the 1,081 newly found cases were offered examination at School Eye Clinics.

The School Medical Officers are also encouraged to perform vision tests at the routine examinations of those school entrants who are able to co-operate.

To the 361 old cases of squint were added 232 children newly found to be suffering from squint and a number were referred to various hospitals for orthoptic treatment or operation.

## Chiropody

The School Health Service continued to utilise the Chiropody Service and the Education Committee bore 20% of the cost. Four full-time and twenty-five part-time chiropodists were employed at sixty-six clinics, sixteen of which were devoted solely to the care of school children. The greater part of the treatment, however, was carried out on school premises. Head Teachers have been most co-operative and have said they find this arrangement causes only a minimum of disruption to the school and the child's education.

Since the inception of the chiropody service, 3,046 children have been referred for treatment. During the year there were 2,379 new referrals and 9,956 treatments were given. This was an increase of 8,252 over the number of treatments given in 1964.

**Table 16.****Cannock Orthopaedic Clinic**

No. on register at end of December, 1965	108
No. of new cases ... ... ... ...	41
No. discharged after maximum benefit ...	22
No. of cases lost sight of, etc. ... ...	22
No. of attendances for physiotherapy ...	2,180
No. of attendances for ultra violet light treatment ... ... ... ...	704
No. of examinations by Orthopaedic Surgeon ... ... ... ...	146

**Table 17. Defects under observation and treatment at Cannock Clinic**

Anterior poliomyelitis	...	...	...	7
Hemiplegia	...	...	...	1
Scoliosis	...	...	...	2
Kyphosis	...	...	...	7
Poor posture	...	...	...	2
Spina Bifida	...	...	...	1
Knock knees	...	...	...	19
Flat feet	...	...	...	37
Hallux Valgus	...	...	...	8
Hammer toes	...	...	...	9
Club foot	...	...	...	10
Pes Cavus	...	...	...	10
Wry neck	...	...	...	2
Short leg	...	...	...	1
Spastic	...	...	...	3
Exostosis os calcis	...	...	...	3
Ganglion	...	...	...	2
Other conditions	...	...	...	6
				130

**Table 18. Treatment at Remedial Exercise Clinics**

<i>Clinic</i>	<i>No. of children referred</i>	<i>No. of children whose treatment was completed</i>	<i>No. of children discharged</i>	<i>No. on Register at 31.12.65</i>	<i>No. of treatment given</i>
Aldridge ..	16	14	15	6	117
Bilston ..	24	23	28	11	335
Blackheath ..	22	20	26	11	265
Brownhills ..	12	9	14	6	100
Darlaston ..	10	3	11	9	46
Kingswinford ..	21	17	25	10	211
Lower Gornal ..	20	9	16	12	248
Old Hill ..	18	20	29	8	367
Sedgley ..	20	18	21	14	208
Stafford ..	83	45	68	31	817
Tettenhall ..	35	30	41	13	372
Tividale ..	10	9	13	5	156
Uttoxeter ..	34	22	36	14	413
	325	239	343	150	3,655

The following table shows the main defects which were having or awaiting treatment at the end of the year.

**Table 19.**

<i>Clinic</i>	<i>Posture</i>	<i>Breathing Exercises</i>	<i>Defects of Legs &amp; feet</i>	<i>Other</i>
Aldridge ..	—	5	1	—
Bilston ..	1	9	—	1
Blackheath ..	—	8	—	3
Brownhills ..	—	5	1	—
Darlaston ..	—	3	—	6
Kingswinford ..	2	6	1	1
Lower Gornal ..	—	11	—	1
Old Hill ..	—	1	7	—
Sedgley ..	3	5	4	2
Stafford ..	2	2	17	10
Tettenhall ..	1	4	4	4
Tividale ..	1	3	1	—
Uttoxeter ..	—	2	7	5
	—	—	—	—
	10	64	43	33
	—	—	—	—

## **Ear, Nose and Throat**

2,417 children were referred for examination at 127 clinic sessions compared with 2,384 in the previous year. 1,878 children were examined by one of the two part-time Ear, Nose and Throat Consultants and of these 976 were found to have significant defects. (Table 22 gives the analysis of defects found). Out of this number 423 (402 in 1964) were subsequently referred to hospital for treatment. The majority were suffering from enlarged tonsils and/or adenoids or required investigations of sinus infection. Those who needed non-operative treatment were referred to their own doctor.

There were 132 children found to be suffering from some degree of deafness, of whom 29 were recommended for a special school and of this number 23 were admitted and the remaining 6 were on the waiting list at the end of the year. Twenty-three children were referred to the peripatetic teaching service. Twenty-one children were provided with hearing aids and the remaining 59 children were given the benefit of a place near to the teacher during oral instruction and given as much additional help as possible at the ordinary day schools.

In addition, 231 children with enlarged tonsils and adenoids, were considered by the School Medical Officers to require treatment and were referred to hospital after notification had been sent to the private practitioner.

A total of 665 children was referred to hospital.

## **New Cross Audiology Clinic**

This clinic was established in 1962 as a joint unit by the Staffordshire County Council, Wolverhampton County Borough and the Wolverhampton Hospital Management Committee.

It is under the control of Mr. G. O. Clark, one of the part-time County Ear, Nose and Throat Consultants, who is also a Consultant to the Hospital Management Committee. The staff consists of an audiometrist seconded from the hospital as part of her duties; a whole-time health visitor and a teacher of the deaf who is attached to the Needwood Partial Hearing School for administrative and teaching guidance purposes. When required the Senior Medical Officers for Schools for Staffordshire and Wolverhampton attend joint sessions to discuss outstanding problems with Mr. Clark and the staff. Other consultants can be called on as required. The aim of the clinic is to diagnose hearing loss in infants at the earliest possible age; to fit hearing aids where necessary; and to educate the child and the parents to overcome the disability.

**Table 20.**

Number of Staffordshire children seen during 1965 at the New Cross Audiology Clinic:

<i>Age Range of New Cases</i>	<i>Number of children</i>		
	<i>Boys</i>	<i>Girls</i>	<i>Total</i>
Under 1 year ...	2	—	2
1—2 years ...	—	3	3
2—3 years ...	5	2	7
3—4 years ...	2	2	4
4—5 years ...	2	—	2
<b>Total</b> ...	<b>11</b>	<b>7</b>	<b>18</b>

Of the eighteen children seen six were fitted with hearing aids during the year and four boys and three girls were admitted to special schools.

### Admissions to Needwood School

Partially hearing children, potentially suitable for admission to Needwood Special School from Staffordshire and other Local Education Authorities, were examined during the year by the Diagnostic Team which consists of one of the County E.N.T. Consultants and the Headmaster of Needwood School and the Senior Medical Officer for Schools.

The Team held 4 diagnostic sessions at Needwood School and saw 15 children as a result of which 5 Staffordshire children and 6 children from other areas were recommended for special schooling.

The E.N.T. Consultant made 5 routine visits to advise and supervise treatment of children at Needwood.

Of the more severe cases of deafness 29 children were recommended for admission to special schools and 23 were children from Staffordshire. The recommendations were as follows:—

For Needwood Special School for the Partially Hearing:—

11 children including 5 from Staffordshire.

For the Mount School, Stoke-on-Trent, 6.

For Dockray Nursery Unit in Manchester, 1.

For Royal School for Deaf, Martley, 2

For the Braidwood Day School, Birmingham, 3.

For the Longwill Day School, Birmingham, 4.

For the Royal School for the Deaf, Derby, 2.

**Table 21. Summary of Statistics relating to Ear, Nose and Throat Clinics 1965**

Clinic	No. of Sessions	No. of children referred for examination	No. of children who did not attend	No. of children found to have defects	No. of children referred to Hospital	No. of children not needing treatment or observation
Biddulph	1	20	4	10	5	6
Bilston	12	225	47	75	32	103
Brewood	2	36	7	10	6	19
Brierley Hill	7	124	28	48	17	48
Brownhills	7	133	31	58	29	44
Cannock	7	138	38	56	25	44
Cheadle	4	81	17	26	14	38
Gt. Wyrley	1	20	2	8	5	10
Kidsgrove	3	60	19	23	12	18
Kingswinsford	2	42	5	18	2	18
Leek	2	38	12	13	9	13
Lichfield	6	121	33	41	17	47
Pheasey	2	33	4	21	13	8
Rowley Regis	6	111	28	40	12	43
Rugeley	3	60	7	27	13	26
Sedgley	5	92	24	36	13	32
Shelfield	5	101	20	39	21	42
Stafford	9	178	48	68	24	62
Stone	1	20	1	11	5	8
Tamworth	5	96	17	51	25	28
Tettenhall	5	95	20	30	9	45
Tipton	7	130	33	59	22	38
Tividale	1	19	6	7	2	6
Tutbury	1	20	4	4	2	12
Uttoxeter	4	63	14	31	15	18
Wednesbury	10	195	35	103	50	57
Wednesfield	8	148	32	56	27	60
Wombourn	1	18	3	6	2	9
	127	2,417	539	976	423	902

**Table 22. Analysis of defects found at Ear, Nose and Throat Consultant Clinics**

Tonsils and/or adenoids	...	...	...	385
Catarrhal otitis media	...	...	...	186
Chronic otitis media	...	...	...	17
Radical mastoid	...	...	...	5
Healed suppurative otitis media	...	...	...	49
External otitis and aural polypi	...	...	...	22
Deafness	...	...	...	132
Sinus investigation	...	...	...	51
Rhinitis	...	...	...	10
Epistaxis	...	...	...	7
Wax	...	...	...	66
Speech defect	...	...	...	9
Mouth breather	...	...	...	8
Cleft palate	...	...	...	3
Dental defects	...	...	...	2
Deflected nasal septum...	...	...	...	8
Observation	...	...	...	10
Eustachian obstruction	...	...	...	6
				976

### **A report on the Peripatetic Service for Partially Hearing Children in the County of Stafford**

Information for this report has been supplied by one of the peripatetic teachers.

“Work with partially hearing children has continued throughout the year in homes and schools. Due to the size of the case load it has been necessary to establish priorities and parent guidance and the training of young deaf children in their homes has been given first preference. Priority has also been given to those in the first three or four years of Primary School; to pupils in their first year at Secondary School; and to those newly issued with a hearing-aid.

Following experimental work in one school last year the inductance loop system has been installed in four more Primary Schools, where it is proving very beneficial.”

## Audiometric Survey

The Audiometrists continued to test the hearing of children of 6 years of age, i.e. those born in 1959. Children of various ages, who were presented by head teachers because of a suspicion that hearing was defective, continued to be seen.

The results continue to show the need of examination by an Ear, Nose and Throat Surgeon.

The County Council, in co-operation with Newcastle Excepted District, continued to employ a part time audiometrist for two sessions per week in the north of the County.

**Table 23.**

	No. examined	No. with hearing abnormal	% with hearing abnormal
Absentees in 1964 ...	1,379	149	10.8%
Children of 6 years of age	10,929	1,322	12.1%
Children of various ages presented by teachers ...	145	89	61.4%
	12,453	1,560	

Number of schools visited ... 395 in 1965, as against 359 (1964)

In addition, there has been a re-test of 226 children whom it has been considered advisable to keep under supervision. Of these 160 were still found to have a loss of hearing and arrangements will be made for them to be examined by one of the County Ear, Nose and Throat Consultants.

Teachers presented 145 children, whose hearing ability was suspect in their opinion, to the visiting audiometrists. They were children of all ages outside the 6 year age group being tested. No less than 89, or 61.4%, were found to have a hearing loss requiring further investigation which was arranged.

There were 1,949 children absent from school at the time of the audiometrist's visit and arrangements will be made for them to be tested during 1966.

The 1,560 children found by the audiometrist to have defective hearing were referred for examination to the County Ear, Nose and Throat Consultants and during the year it was possible to make appointments for 1,279 of them at the various clinics. 681 of that number were found to require treatment and an analysis of the conditions found are given in the following table.

**Table 24. Analysis of Cases of Suspected Deafness referred to County Ear, Nose and Throat Consultants from Audiometric Survey.**

*Deafness Confirmed*

*A. Remediable:*

Deafness due to wax	...	...	...	...	63
Catarrhal deafness following infection				...	21
					84

*B. Probably Permanent:*

Congenital malformation of ear	...	...	...	...	1
Deafness due to congenital, nerve and mixed causation (of varying degrees of severity)	...	...	...	...	99
					100

*Conditions other than Deafness*

*A. Infective*

Tonsils and/or adenoids	...	...	...	...	123
Catarrhal otitis media	...	...	...	...	179
Chronic otitis media	...	...	...	...	83
Healed suppurative otitis media	...	...	...	...	20
Acute suppurative otitis media	...	...	...	...	20
External otitis and aural polypi	...	...	...	...	9
Radical mastoid	...	...	...	...	4
Sinus infection	...	...	...	...	30
					468

*B. Non-Infective:*

Mouth breather	...	...	...	...	11
Speech defects	...	...	...	...	4
Epistaxis	...	...	...	...	3
Rhinitis	...	...	...	...	3
Foreign body	...	...	...	...	2
Cleft palate	...	...	...	...	1
Unco-operative	...	...	...	...	5
					29

Grand Total    ...    ...    ...    ...    681

The children in the "Probably Permanent Deafness" group were suffering from defects most of which could be assisted by the provision of a hearing aid. In the group of "Infective Conditions," the vast majority can be cured or improved by early medical treatment but, in the absence of this, permanent loss of hearing might develop.

The 63 children with wax in their ears had some degree of deafness which only constituted a handicap until the wax was removed.

## Hearing Aids

It is known there are 139 children in this County who have been fitted with hearing aids and of this number, 21 were newly supplied during the year.

## Child Guidance

Dr. W. Johnson, the Principal Medical Officer for Mental Health has continued to hold clinics for two sessions each week at Stafford, Dr. Pedley Baker holding clinics there on a further three sessions each week. Dr. Hazel Baker, full-time psychiatrist, held clinics at Coseley, Lichfield and Newcastle.

At the end of 1965 there were four full-time educational psychologists and five psychiatric social workers working a total of thirty-nine sessions, with the addition of four case-work supervisors (also qualified psychiatric social workers) working part-time (one-fifth) in the Child Guidance Service. Again a full Child Guidance Service has been provided at Stafford, Newcastle, Lichfield and Coseley. but no psychiatrist was available on a permanent basis for the Kingswinford and Wombourn clinics although the Principal Medical Officer for Mental Health held occasional clinics at Kingswinford and Wombourn during the year.

The total number of clinic sessions held during the year with a psychiatrist in attendance was 672. There is at present no psychiatrist provided by the Birmingham Regional Hospital Board. The number of children treated was 516. Thirteen Staffordshire children were treated by other L.E.A.'s, but 14 children were seen at Lichfield clinic for the Burton-on-Trent Authority and four Stoke-on-Trent children were seen at the Newcastle Child Guidance Clinic.

Cases referred to the service during the year totalled 360, and new cases seen for the first time by the psychiatrists amounted to 231 of whom 23 were under five years of age. An increasing number of children are being referred at an earlier age. This is a most desirable development as mal-adjustment is more readily treated at an early stage.

**Table 25. Child Guidance Clinics**

Stafford	13 Lichfield Road (Tel. 52318)	Tuesday all day	Dr. W. Johnson
Stafford	13 Lichfield Road (Tel. 52318)	Wednesday all day Friday a.m.	Dr. Pedley Baker
Newcastle	Brampton Trees Hanover Street (Tel. 65743)	Wednesday all day	Dr. Hazel Baker
Lichfield	Sandford Street (Tel. 2246 or 3045)	Monday all day Thursday all day	Dr. Hazel Baker
Coseley	Brierley Lane (Tel. Bilston 41396)	Tuesday all day Friday all day	Dr. Hazel Baker
Kingswinford	Standhills Road (Tel. 4940)	Wednesday all day	No Psychiatrist
Wombourn	Mill Lane Wombourn (Tel. 2495)	Thursday all day	No Psychiatrist

**Table 26. Speech Therapy Clinics**

**Summary of Statistics relating to children attending Speech  
Therapy Clinics during the year**

County Clinics	No. of treatments given	No. of children under treatment at 31.12.65	No. of children awaiting treatment at 31.12.65	No. of new cases during the year	No. of children discharged during the year
Aldridge ..	342	34	16	23	9
Biddulph ..	178	8	8	23	7
Bilston ..	966	35	56	56	23
Brownhills ..	502	59	12	34	20
Chadsmoor ..	381	56	10	24	15
Cheadle ..	155	9	1	19	8
Codsall ..	248	7	—	20	22
Gnosall ..	81	—	—	11	11
Kidsgrove ..	85	—	—	8	10
Kingswinford ..	256	9	9	30	40
Leek ..	240	12	4	28	25
Lichfield ..	312	13	16	26	33
Lower Gornal ..	190	7	4	27	29
Pelsall ..	197	16	7	11	7
Rising Brook ..	478	13	21	38	10
Rugeley ..	474	8	17	16	15
Sedgley ..	205	5	5	22	13
Shelfield ..	160	20	12	17	10
Stafford ..	571	29	9	108	51
Stone ..	45	—	—	1	14
Tamworth ..	222	12	12	36	27
Tettenhall ..	158	8	—	12	25
Tipton ..	249	11	17	20	62
Uttoxeter ..	238	5	1	34	28
Wednesfield ..	246	15	32	35	11
Wombourn ..	336	11	2	23	19
	7,515	402	271	702	544

**Table 27.**

*No. of Children  
having speech therapy  
at 31.12.65*

*Hospital or Authority's Clinic*

Birmingham Children's Hospital	...	...	3
Wolverhampton Royal Hospital	...	...	20
North Staffordshire Royal Infirmary	...	...	16
Burton-on-Trent C.B.	...	...	2
Shropshire C.C.	...	...	3
			44

**Table 28. Diagnosis of children attending County Speech Therapy Clinics during the year**

Cleft palate	...	...	...	...	59
Cluttering	...	...	...	...	1
Dysarthria	...	...	...	...	7
Dysenia	...	...	...	...	13
Dyslalia (multiple)	...	...	...	...	817
Dyslalia (simple)	...	...	...	...	151
Dyslalia rhotacism	...	...	...	...	2
Dysphasia	...	...	...	...	14
Dysphonia	...	...	...	...	11
Indistinct speech	...	...	...	...	28
Nasality (excessive)	...	...	...	...	3
Nasality (insufficient)	...	...	...	...	6
Retarded language	...	...	...	...	13
Retarded speech	...	...	...	...	221
Sigmatism	...	...	...	...	33
Stammering	...	...	...	...	431
Stammering and dyslalia	...	...	...	...	55
Supra bulbar palsy	...	...	...	...	2
					1,867

One part time speech therapist resigned and one joined the full time staff but resigned three months later. By the end of the year, six speech therapists were working for the County. Their time was equivalent to 4.2 full-time therapists, which left the establishment short of 1.8 whole time staff.

One therapist devoted two days a week to visiting Wightwick Hall special school for the physically handicapped and one visit a fortnight was paid to the William Baxter day special school.

## Ultra Violet Light Clinics

There was a fall in the number of children referred for treatment, 257 compared to 268 in 1964 and a fall in the number of treatments given, viz., 2,863 this year as compared with 3,462 in 1964.

The following analysis shows the conditions from which the children were suffering together with the results of treatment.

Table 29.

<i>Diagnosis</i>	<i>Benefit</i>	<i>No Benefit</i>	<i>Treatment Incomplete</i>
Anaemia	1	—	1
Anorexia	7	—	2
Asthma	3	2	—
Acne	9	—	1
Bronchitis	7	—	3
Chronic Tonsils and Adenoids	1	—	—
Catarrh	3	1	4
Chronic Bronchitis & Asthma	6	—	1
Chronic Respiratory Infection	9	1	5
Frequent Colds	2	2	—
General Debility	27	7	12
General Debility & Blepharitis	3	—	—
General Debility & Bronchitis	6	2	3
General Debility following Pneumonia	2	—	1
General Debility following Whooping Cough	1	—	—
General Debility and frequent Colds	23	—	3
Migrane	1	—	1
Nervous Debility	—	1	1
Recurrent Coughs & Colds	51	9	18
Recurrent Otorrhoea	1	—	—
Recurrent Styes	1	—	—
Recurrent Tonsilitis	—	1	—
Tonsillitis & Bronchitis	—	—	1
Scaly dry skin on face	—	1	—
	164	27	57

## Hospital Treatment

Table 30.

(i) *Treatment of Tonsils and Adenoids*

No. of children referred by School Medical Officers and County ENT Consultants ... ... ... ...	665
No. of children so referred who received operative treatment ...	442
Total number of children notified by hospitals who received operative treatment ... ... ... ...	1,522
No. who had treatment for other ear, nose and throat conditions ... ...	363
No. of children awaiting treatment ...	631

Full information is not received from all hospitals in regard to treatment of these cases. Hospitals endeavour to co-operate by giving priority to urgent cases, but there is often a substantial period of waiting involved before the operative treatment can be obtained. The School Health Service helps by continuously reviewing the children on the waiting lists. 220 of the children were treated as out-patients.

(ii) *Orthopaedic Treatment*

No. of Children referred to Hospitals	393
---------------------------------------	-----

(iii) *Orthoptic Treatment*

Table 31.

*No. of children newly referred to Hospitals during the year*

Birmingham & Midland Eye Hospital	7
Burton-on-Trent Hospital ... ...	3
Corbett Hospital ... ...	3
Derby Royal Hospital ... ...	1
Dudley Guest Hospital ... ...	9
Lichfield Victoria Hospital ... ...	54
North Staffs. Royal Infirmary ... ...	54
Staffordshire General Infirmary ...	46
Sutton Coldfield, Good Hope Hospital	27
Tamworth St. Editha's Hospital ...	16
Walsall General Hospital ... ...	4
Wolverhampton Eye Infirmary ...	67

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## REPORT OF THE PRINCIPAL COUNTY SCHOOL DENTAL OFFICER

### Staff

It is disappointing that in this the last report covering a complete year before the boundary changes affecting Staffordshire take effect, the staffing position in the dental service showed no improvement over the previous year. The equivalent of 19.3 whole-time Dental Officers were in post at 31st December, 1965, compared to 19.4 at the end of 1964 and 19.5 at the end of 1963. Three whole-time officers resigned during the year, one retiring having reached the age limit, together with three part-time officers. Three whole-time officers commenced duty together with three part-time officers, losses and gains of staff almost exactly balancing each other.

There is little comfort to be gained from the fact that the staffing position has remained constant over the last three years at about the equivalent of 19 whole-time dental officers. The inability to recruit additional dental surgeons up to the authorised establishment of thirty-three has frustrated the development of the dental services and for many years it has not been possible to offer full treatment to all children. Advertisements of vacancies have continued in the professional journals and Staffordshire's needs made known to the teaching hospitals. However, the overall national shortage of dentists coupled with the greater remuneration to be gained in private practice and the National Health Service makes the number of dental surgeons interested in a career of school dentistry, with the concomitant strain of treating children almost exclusively, severely limited.

Staffordshire's ratio of 1 dental officer to approximately 7,500 children makes it manifestly impossible to make available dental treatment for all children attending maintained schools. As in previous years the policy has been to provide an emergency service for all children together with a high standard of full dental care for those fortunate enough to happen to live in areas where it is possible to provide such a service. Nevertheless, the dental service will be failing in its duty until it is possible to provide full treatment for all children throughout the County.

Mr. T. C. J. Price, after being granted leave of absence with pay for the academic year starting in October, 1964, returned to whole-time duty at Lichfield in July, having successfully gained the Diploma in Public Dentistry at the University of St. Andrews, Dundee.

The County Council decided early in the year to adopt a recommendation that the authorised establishment should be

increased by four posts for Area Dental Officers and four posts for Senior Dental Officers, to ensure the most efficient conduct locally of the dental services and to provide a career structure in consequence of which it is hoped to improve recruitment. The four Area Dental Officer posts, one in North Staffordshire, one in Mid-Staffordshire, one in South-East Staffordshire and one in South-West Staffordshire were filled during the year. Although three applications for these posts were received from dental surgeons outside the service, the successful applicants were already members of the County Council's dental staff. The appointment of these four Area Dental Officers, each of whom spends the equivalent of one half-day per week on administrative and supervisory duties is giving valuable assistance to the Principal County School Dental Officer in the day-to-day conduct of the service and ensuring the best possible use of the available dental manpower.

Owing to internal staff moves, the four posts of Senior Dental Officers were not filled at the end of the year. These posts are tenable by dental officers who are required to supervise one or more dental auxiliaries or otherwise have clinical responsibilities greater than those of ordinary dental officers and it is envisaged that they will be filled by members of the staff who are already carrying out such extra work. The duties of Senior Dental Officers are wholly clinical and no administrative work is involved.

## Dental Ancillary Workers

Seven whole-time dental auxiliaries out of an authorised establishment of eight were in post at 31st December, 1965, compared to four at the end of 1964. Two auxiliaries resigned during the year and five commenced duties. The newcomers took up duty at Lammascote Road clinic, Stafford, Brown-hills, Aldridge, Brierley Hill and Lichfield clinics. In 1,352 treatment sessions, the dental auxiliaries carried out 4,560 fillings and 990 scalings and polishings for schoolchildren and, additionally spent 302 sessions on dental health education. The dental auxiliaries are proving that they can give valuable help in the dental service and the increase in their numbers is welcomed. An additional dental auxiliary was interviewed towards the end of the year and will take up her duties with the County in the new year when an additional surgery has been made ready, thus completing the establishment. As hitherto, in addition to carrying out treatment under the supervision of the dental officers, several of the

dental auxiliaries are spending approximately two half-days per week on dental health education, usually by giving talks on the care of the teeth in schools and welfare clinics. Great importance is attached to this preventive aspect of their duties as a method of trying to reduce the tremendous amount of dental disease occurring in children. This part of the auxiliaries' work is co-ordinated by the County Health Education Officer in consultation with the Principal County School Dental Officer.

The dental auxiliaries who were in post in May were visited by a representative of the General Dental Council which is responsible for the organisation of the dental auxiliaries' experimental scheme. It is understood that the Council were satisfied with the accommodation and general arrangements made for the auxiliaries by the County Council and the General Dental Council's assistance in making available five additional auxiliaries during the year is appreciated.

The five year experimental scheme of training dental auxiliaries is due to end in 1966 and to enable the General Dental Council to report to the Privy Council on the scheme the Council made arrangements with the employing authorities throughout the United Kingdom for independent general dental practitioners not employed in School Dentistry to inspect random samples of auxiliaries' work. Two such practitioner dentists carried out such inspections in November in respect of three of the dental auxiliaries who had been working in Staffordshire for some time. Their reports were confidential and not known to this Authority but it was inferred that they were favourably impressed with the quality of the treatment inspected. Whether or not a class of dental auxiliaries' is established under the Dentists Act, 1957, will be decided by the government having regard to the evidence relating to the quality of treatment, the economics of their training and future employment. So far as Staffordshire is concerned, it is very much hoped that their training will be continued since they play a valuable part in reinforcing the efforts of the numerically inadequate dental officers.

The dental hygienist has continued her part-time work during the year, mainly on clinical duties, but also carrying out some dental health education in schools.

### **Clinics and Equipment**

The new Cannock clinic, containing two dental surgeries was completed in November and will be open for dental treatment early in 1966 when the installation of equipment is completed. The Quarry Bank dental clinic was moved into

new premises in Sheffield Street, from the Old Mount Pleasant school, in November and is worked on a part-time basis. It was possible in January to re-open, on a whole-time basis, the clinics at Cheadle and Pheasey whilst the Bilston Street clinic, Darlaston, was opened whole-time in April and Shelfield clinic part-time in October. It was unfortunately necessary to close Stone clinic in July, Wednesfield clinic in September and Blackheath and Old Hill clinics, Rowley Regis in June owing to resignations of staff and inability to recruit additional dental officers. The whole-time dental officer at Tamworth retired at the end of April but it has been possible to provide part-time services mainly to deal with emergencies.

An additional surgery for a dental auxiliary was provided at the Cottage Street clinic, Brierley Hill, worked by a whole-time auxiliary from September onwards.

The following clinics remained closed owing to staff shortages; Bentley Clinic, Darlaston, Central and Birch Street clinics, Tipton and Lower Gornal.

The arrangement with Wolverhampton County Borough whereby children, resident in the Tettenhall and Wednesfield areas receive emergency dental treatment at the Red Hill Street clinic, Wolverhampton, continued, and the help given by the Wolverhampton Authority was much appreciated.

The following complete list of dental clinics in the County shows where and how it has been possible to provide treatment:—

Lammascote Road, Stafford	No. 1 surgery	whole-time
	2 „ (auxiliary)	„
	3 „ „	part-time
Rising Brook, Stafford	No. 1 surgery	part-time
	2 „ (aux.)	whole-time
Stone ... ... ...	... ... ...	whole-time
		closed from July
Codsall ... ... ...	No. 1 surgery	whole-time
	2 „ (auxiliary)	part-time
Cheadle ... ... ...	... ... ...	whole-time
Leek ... ... ...	... ... ...	whole-time
Uttoxeter ... ... ...	... ... ...	part-time
Lichfield ... ... ...	No. 1 surgery...	part-time
		whole-time from July
	2 „ (auxiliary)	
		whole-time from Sept.
Tamworth ... ... ...	whole-time/part-time	from May
Aldridge ... ... ...	No. 1 surgery...	whole-time
	2 „ (auxiliary)	„

Brownhills	...	...	No. 1 surgery...	whole-time
			2 „ (auxiliary)	whole-time from Sept.
Chadsmoor	...	...	...	...
Pheasey	...	...	...	whole-time
Cannock	...	...	No. 1 surgery...	Opening 1966
			2 „ (auxiliary)	„
Short Heath, Willenhall			...	part-time
Bilston St., Darlaston	...		No. 1 surgery	
				whole-time from April
Bentley, Darlaston	...	...	2 „	closed
Wednesfield	...	...	...	closed
Bilston	...	...	...	part-time, closed Sept.
Central Clinic, Tipton			...	whole-time
Birch Street, Tipton	...		No. 1 surgery...	closed
Quadrant, Sedgley	...		2 „	closed
Coseley	...	...	...	closed
Shelfield	...	...	...	part-time
Lower Gornal	...	...	...	part-time since Oct.
Cottage St., Brierley Hill			No. 1 surgery...	whole-time
Shelfield Street, Quarry Bank			2 „ (auxiliary)	
Tividale, Rowley Regis	...		...	part-time
Blackheath, Rowley Regis	...		...	part-time
Old Hill, Rowley Regis	...		...	part-time/closed from June
			...	part-time/closed from June

A total of 610 voluntary evening sessions were worked during the year at Brownhills, Aldridge, Pheasey, Brierley Hill, Codsall, Chadsmoor and Coseley (part-year) clinics.

The six mobile dental clinics were employed in the following areas:—

Mobile No. 1	Biddulph/Knypersley	...	whole-time
2	Stone R.D. and Special Schools		part-time
3	Sedgley/Pensnett/Bromley	...	whole-time
4	Newcastle R.D./Kidsgrove	...	part-time
5	Amblecote/Kingswinford/ Seisdon R.D.	...	part-time
6	Tamworth/Rugeley	...	part-time

Numbers 1 and 2 mobile clinics are 13 and 12 years old respectively and this, coupled with the expected loss of two mobiles to another authority when the boundaries revision takes effect in April, 1966, determined the ordering of two new

more compact, mobile dental clinics for delivery as soon as possible after 1st April, 1966. Rural communities can be better served by mobile clinics thereby avoiding the need for children to travel considerable distances to fixed clinics. An improvement in the facilities in the rural areas is very much needed but is dependent on being able to recruit additional staff.

## Inspection and Treatment

The totals of dental inspection and treatment carried out during the year appear on page 55. It will be noted that the form in which the figures for the year is presented differs from those of previous years in accordance with the new method of daily, monthly and yearly totals for the three age groups required by the Department of Education and Science. This makes direct comparisons of the work carried out with that in previous years in some particulars rather difficult. The number of children routinely inspected at school dropped from 45,380 in 1964 to 39,363, whilst the number inspected at clinics rose from 9,699 to 17,820, this total being made up of 3,294 emergency cases, the remainder attending for regular checks. 19,865 individual children made 52,900 attendances for treatment compared to 18,476 individuals making 51,354 attendances in 1964. On average therefore, each child treated during the year made 2.6 visits, the corresponding figure for the previous year being 2.7.

A total appearing in the tables for the first time is the number of courses of treatment completed during the year, viz. 16,503. This does not correspond with the actual number of individual children made dentally fit since one child may have received more than one course of treatment during the year. It does indicate, however, that approximately 15,000 of the 19,865 individuals treated did have their mouths completely put in order.

The total number of fillings rose from 41,155 in 1964 to 44,495 made up of 8,833 fillings in deciduous teeth and 35,662 in permanent teeth. The number of extractions rose to 24,781 from 24,657 in 1964 the ratio of permanent teeth extracted (5,807) to permanent conserved (30,006) being 1:5.1 which is commendable since the success of the School Dental Service stands, or falls, on its ability to save teeth rather than extract them.

The number of general anaesthetics fell slightly from 6,848 in 1964 to 6,446, all of which except for 223 were given by specialist medical anaesthetists.

112 school children were supplied for the first time with dentures, three of these with full dentures and a total of 146 dentures were constructed for school children.

The dental staff spent approximately 5% of their time on the treatment of pre-school children and of expectant and nursing mothers. It is felt that it would be worthwhile to devote a greater proportion of time to treatment of the very young child so as to prevent more treatment being required later on but with the shortage of staff that exists and the need for treatment on the part of school children, this has not been possible. 415 new orthodontic cases were undertaken during the year and the Consultant in Children's Dentistry has given invaluable help both in treatment and in advising other dental officers on the best treatment of these patients. The Consultant attends by arrangement at various clinics in the County and patients and their parents are thereby saved considerable travelling and waste of time. The dental officers have the benefit of skilled orthodontic experience and treatment planning. There is no doubt that having a specialist orthodontist on the staff shows great advantages compared with referring cases of tooth irregularity to hospital.

### Special Investigations

Staffordshire County Council was invited by the Department of Education and Science to take part, with other selected local authorities, in a survey of the dental condition of a 10% sample of boys and girls aged 15 years. During the Spring term 879 pupils were carefully examined and their condition charted on special forms provided by the Department by some 12 members of the dental staff who visited 117 secondary schools throughout the County. The willing co-operation of all Head Teachers is gratefully acknowledged. The investigation not only concerned the actual dental condition of the pupils but also the extent to which the dental needs of children were being met through the school dental service and through the National Health Service. The findings of the Statistics Branch of the Department of Education and Science are awaited with a good deal of interest since much is spoken of the dental condition of school children, but firm evidence from a statistically significant number of children is lacking.

It is of interest that sample dental inspections of 5 year old school entrants and 15 year old school leavers have been carried out in Staffordshire by the dental staff in 1961, 1962 and 1964 and it will be interesting to see if the statistics of this national survey agree closely or otherwise with those for Staffordshire.

## General Remarks

A three-day visit of inspection of the County dental services was made by one of the Dental Officers of the Department of Education and Science in March and visits to several of the clinics to meet dental officers were arranged. The report from the Department on the Dental Officer's findings was received in June and satisfaction was expressed with the way in which the dental services were conducted. The Department considered that the Authority's school dental service was well organised in the face of the serious staff shortage, that the dental officers' output of work was satisfactory and that conditions of service were good. The report also expressed appreciation of the considerable effort being made by the staff in the field of dental health education to which the Ministers of Health and Education attach particular importance.

An informal visit in September was made by the Senior Dental Officer of the Department of Education and Science. These visits and the opportunities they provide to discuss problems, are appreciated.

The Principal School Dental Officer as a member of the Post-Graduate Courses Sub-Committee of the British Dental Association was largely responsible for organising a two-day residential course on orthodontics at the University of Keele in March. This course was attended by over 100 public dental officers from all parts of the country, including two-whole-time officers on the staff of the County Council and aroused considerable interest—so much so that preparations are in hand for a repeat course at Keele in 1968.

The County Council has decided that a decision whether or not to fluoridate the water supplies, should be made by local district councils on the basis that where there was a majority in favour in any water undertaking's area, fluoridation should be implemented. By the end of the year, no water fluoridation was actually in operation in any part of Staffordshire.

As time goes on and the example of the City of Birmingham, which has fluoridated water, shows no ill effects but only an improvement in the condition of children's teeth, it is to be hoped that demand from the general public for fluoridation will gather strength.

Table 32.

## DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY DURING 1965.

1. *Attendances and Treatment*

		Ages 5 to 9	Ages 10 to 14	Ages 15 and over	Total
First Visit	...	9,988	8,417	1,460	19,865
Subsequent visits	...	12,739	17,108	3,188	33,035
Total visits	...	22,727	25,525	4,648	52,000
Additional courses of treatment commenced		877	676	89	1,642
Fillings in permanent teeth	...	9,213	21,747	4,702	35,062
Fillings in deciduous teeth	...	8,047	786	—	8,833
Permanent teeth filled		7,510	18,449	4,047	30,006
Deciduous teeth filled		7,052	615	—	7,667
Permanent teeth extracted	...	929	4,023	855	5,807
Deciduous teeth extracted	...	14,903	4,071	—	18,974
General anaesthetics		4,301	1,944	201	6,446
Emergencies	...	1,923	1,164	207	3,294
Number of Pupils X-rayed		...	...	...	803
Prophylaxis	...	...	...	...	5,110
Teeth otherwise conserved		...	...	...	2,240
Number of teeth root filled		...	...	...	56
Inlays	...	...	...	...	8
Crowns	...	...	...	...	50
Courses of treatment completed	...	...	...	...	16,503

2. *Orthodontics*

Cases remaining from previous year	...	...	620
New cases commenced during year	...	...	415
Cases completed during year	...	...	351
Cases discontinued during year	...	...	27
No. of removable appliances fitted	...	...	362
No. of fixed appliances fitted	...	...	25
Pupils referred to Hospital Consultant	...	...	28

		5 to 9	10 to 14	15 and over	Total
3. <i>Prosthetics</i>				15	
Pupils supplied with F.U. or F.L. (first time) ... ...	—	3	—	3	
Pupils supplied with other dentures (first time) ...	4	75	33	112	
Number of dentures supplied ... ...	6	89	51	146	
4. <i>Anaesthetics</i>					
General Anaesthetics administered by Dental Officers ... ... ... ...					223
5. <i>Inspections</i>					
(a) First Inspection at school. Number of Pupils				39,363	
(b) First Inspection at clinic. Number of pupils				9,958	
Number of (a)+(b) found to require treatment				29,999	
Number of (a)+(b) offered treatment ...				26,132	
(c) Pupils re-inspected at school clinic ...				7,864	
Number of (c) found to require treatment ...				2,966	
6. <i>Sessions</i>					
Sessions devoted to treatment ... ... ...				9,534	
Sessions devoted to inspection ... ... ...				514	
Sessions devoted to Dental Health Education ...				600	

## INFECTIOUS AND CONTAGIOUS DISEASES

The total number of cases of infectious diseases in schools notified by Head Teachers during the year fell from 12,764 to 10,718. Numerically speaking the major infectious diseases were measles (4,409 cases), chicken pox (3,478 cases), and mumps (1,127 cases).

The most notable change during the year was the decrease (2,895) in the number of cases of mumps and a rise in measles from 2,088 to 4,409. but Rubella numbers fell from 2,104 to 592.

The number of cases of ringworm remained unchanged but the number of cases of impetigo and scabies rose by 23 and 15 respectively.

Figures for scarlet fever and scarletina rose by 233, and dysentery numbers rose by 57 and diarrhoea by 125.

Decreases were found in whooping cough figures which were down by 317, influenza accounted for 70 fewer cases. Hepatitis numbers fell by 43 cases.

Table 33. Number of suspected cases of Infectious and Contagious Diseases notified by Head Teachers

Disease	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Totals
Scarlatina	11	23	25	12	9	18	—	—	4	25	15	14	163
Scarlet Fever	26	48	38	30	22	26	—	—	14	23	27	43	334
Measles	500	630	505	445	690	750	514	—	56	213	46	60	4,409
Rubella	75	95	87	70	50	49	55	—	10	10	22	69	592
Whooping Cough	10	10	21	4	11	8	4	—	8	4	28	11	119
Mumps	130	200	97	107	124	170	164	—	11	24	41	59	1,127
Chicken Pox	300	613	631	450	200	236	307	—	53	57	210	431	3,478
Influenza	16	37	3	12	2	4	4	—	—	4	3	12	90
Impetigo	2	5	12	2	4	4	2	—	1	6	2	2	42
Scabies	3	3	2	5	—	—	—	—	1	—	2	1	21
Ringworm	—	2	—	—	2	—	—	—	—	—	—	—	5
Skin Infections	—	—	—	—	—	—	—	—	—	—	—	—	1
Conjunctivitis	—	5	10	3	—	—	—	—	—	—	—	—	28
Tonsillitis	—	—	—	—	—	—	—	—	—	—	—	—	1
Glandular Fever	—	—	—	—	—	—	—	—	—	—	—	—	5
Enteritis	—	—	10	3	—	—	—	—	—	—	—	—	3
Hepatitis	—	—	3	—	6	—	—	—	—	—	—	—	63
Dysentery	—	4	23	—	—	—	7	1	2	—	7	21	77
Diarrhoea and Sickness	—	—	—	—	—	—	9	—	—	—	—	—	151
Rheumatic Fever	—	—	—	—	—	—	2	—	—	—	—	—	2
<b>Totals</b>	<b>..</b>	<b>1,097</b>	<b>1,703</b>	<b>1,420</b>	<b>1,143</b>	<b>1,287</b>	<b>1,151</b>	<b>—</b>	<b>183</b>	<b>392</b>	<b>418</b>	<b>731</b>	<b>10,718</b>

## Vaccination Against Smallpox

**Table 34. No. of children found to have been vaccinated when examined at the periodical medical inspection.**

Age Group	No. examined	No. vaccinated	No. unvaccinated	Percentage unvaccinated	
				1964	1965
Entrants ..	17,078	8,922	8,156	51.9	47.8
2nd Age Group	5,744	2,408	3,336	58.7	58.1
3rd Age Group	8,929	3,035	5,894	63.9	66.0
Other Periodic Inspections	6,259	3,105	3,154	56.6	50.4
Totals ..	38,010	17,470	20,540	57.7	54.0

## Diphtheria Immunisation

**Table 35. No. of Children (5-14 years) immunised during the year:—**

			1964	1965
Complete immunisation	...	...	4,573	3,766
Re-inforcement doses	...	...	19,017	13,634
			23,590	17,400

## Tuberculosis

**Table 36. Summary of Reports received from Chest Physicians.**

Number of children (aged 5-15 years) on Dispensary registers at the end of 1964	...	...	...	175
Number of new cases during the year	...	...	...	22
Becoming 5 years old	...	...	...	15
Number of deaths	...	...	...	—
Number discharged having left the district	...	...	...	2
Number discharged having recovered	...	...	...	7
Number becoming 15 years old	...	...	...	24
Number of children on registers at end of the year 1965				179

*under Treatment  
during the year  
(i.e. at some time  
during the year)*

*(a) Pulmonary*

1.	Primary Hilar lesions				
(a)	Simple	...	...	84	
(b)	Complicated	...	...	21	
2.	Primary Pleural Effusion			5	
3.	Miliary	...	...	—	
4.	Adult Type	...	...	2	

*(b) Non-Pulmonary*

1.	Lymph Glands				
(a)	Cervical	...	...	6	
(b)	Others	...	...	1	
2.	Bones and Joints	...	...	1	
3.	Meningitis	...	...	3	
4.	Abdomen	...	...	—	

## HEALTH EDUCATION

A great improvement in staffing occurred with the appointment in January of the Deputy Health Education Officer and in September the appointment of three Assistants. The addition of two male staff to assist the Health Education Officer was very welcome as this enabled the experimental course with boys reported last year to be firmly implemented.

The reception by head teachers of the planned programme of Health Education is worthy of mention. By personal contact and discussion, the complete course "Learning to Live" has been accepted by the majority of head teachers. Where doubt existed, arrangements were made for staff to lecture and discuss the course with parents and in each instance parents were overwhelmingly in favour. Unfortunately the number of male staff available does not permit the scheme to be enlarged to incorporate as many schools as would participate. The course has now settled down to include lectures and discussion on personal health, human reproduction, venereal disease and promiscuity, effects of advertising and drug taking, personal and community relationships.

The female members of the staff are continuing to provide

similar talks for girls and every endeavour is being made to provide rather more content on the lines already mentioned for boys rather than on Mothercraft which has been the dominating feature of talks to girls in the past. However, deep rooted impressions sometimes take rather a lot of changing and it will no doubt take some time and patience before the "Learning to Live" course dominates the "Parentcraft" completely.

Staff have continued to visit schools talking to all age groups on specific subjects, i.e. the smoking habit, dental health, foot health. The dental auxiliaries have again been particularly helpful devoting part of their time to teaching dental health in schools and more health visitors are undertaking talks in schools.

Every effort is also being made to assist teachers in their own health education programme by providing visual aids and advice as required.

It is perhaps unfortunate that Health Education does not bring immediate results and is not dramatic in its effects. Today so much emphasis appears to be levelled at immediate achievements that it must be remembered by those who do not see any immediate value in health education that the long term effects should produce a higher standard of health in its fullest concept, i.e. complete physical, mental and social well being and not merely an absence of disease.

**Table 37.**

Subject				No. of Lectures	No. of Children
Dental Health	...	...	...	59	5,265
Personal Health	...	...	...	243	9,008
Parentcraft	...	...	...	133	4,001
Learning to Live	...	...	...	139	5,472
Dangers of Smoking	...	...	...	32	1,528
Home Safety	...	...	...	14	268
Other: { Foot Health Kiss of Life Public Health }	}			36	1,583
Totals	...	...	...	656	27,125*
Total Schools Visited	...	88			

\*NOTE: The figure does not represent different children as many followed a complete course.

## PART V—GENERAL HEALTH

Table 38. Classification of the Physical Condition of Pupils inspected during the year at periodical medical inspections

Age Groups Inspected (By years of birth)	No. of Pupils Inspected	Physical Condition of Pupils Inspected			
		Satisfactory		Unsatisfactory	
		No. (3)	% of Col. 2 (4)	No. (5)	% of Col. 2 (6)
(1)	(2)				
1961 and later	589	588	99.8	1	0.2
1960	7,390	7,359	99.6	31	0.4
1959	9,099	9,023	99.2	76	0.8
1958	2,969	2,947	99.3	22	0.7
1957	487	480	98.6	7	1.4
1956	242	241	99.6	1	0.4
1955	164	161	98.2	3	1.8
1954	798	791	99.1	7	0.9
1953	4,946	4,919	99.5	27	0.5
1952	2,397	2,378	99.2	19	0.8
1951	1,513	1,505	99.5	8	0.5
1950 and earlier	7,416	7,369	99.4	47	0.6
<b>TOTALS ..</b>	<b>38,010</b>	<b>37,761</b>	<b>99.3</b>	<b>249</b>	<b>0.7</b>

This year the number of children classified at Routine Medical Inspections as being in an unsatisfactory state of health decreased from 506 to 249 or from 1.56% to 0.7%. The lowest figure of this nature ever recorded was 23 in 1959 or 0.07%. A classification of this nature is naturally subject to the opinions of the individual medical officers but the position throughout the County is, in general, satisfactory.

Table 39. Milk in Schools Scheme

Type of Milk	No. of Suppliers	No. of Schools supplied	No. of pupils
<i>Maintained Schools:</i>			
Pasteurised	25	666	114,978
Untreated	5	10	184
	30	676	115,162
<i>Non-Maintained Schools:</i>			
Pasteurised	8	31	3,625
Untreated	1	1	101
	9	32	3,726

There has been a slight decrease of 1,193 children taking milk in schools and eight more schools were supplied as compared with 1964.

The number of suppliers decreased by three compared with the previous year.

**Table 40. Milk for Handicapped Pupils unable to attend school**

No. of old applications renewed	...	...	32
No. of new applications granted	...	...	21
No. of children who ceased to receive milk during the year	...	...	15

### **SCHOOL MEALS SERVICE**

The Director of Education has kindly supplied the following information:—

#### **“Expansion of the Service**

The School Meals Service continued to expand rapidly and the daily average number of meals served during the Summer Term was 89,157. The corresponding figure for the previous year was 82,169.

The number of meals required outstrips the growth of increase in kitchen capacity. Every effort is made to overcome the problem by installing additional equipment where possible. Present kitchens in some schools have been extended and additional kitchens have been built on to existing schools. In the planning of new schools it is necessary, in some cases, to provide for all the children on roll to take meals. Dining facilities too are presenting problems where accommodation in the halls is insufficient to cope with the demand for meals.

#### **New Kitchens in New Schools**

<i>County Area</i>	Brewood, St. Mary & St. Chad C.E. (C.) Primary
	Blythe Bridge, The Beeches Junior
	Codsall, St. Nicholas C.E. (C.) Primary
	Brownhills, High Heath Special
	Leek, Compton C.E. (A.) Primary
	Rolleston Junior
	Rugeley, Flaxley Primary
	Rugeley, Upfields Infants
	Rugeley, Western Springs Junior
<i>Cannock Chase</i>	Cannock, Boney Hay Primary

<i>South East Division</i>	Darlaston, Bentley West Primary Wednesfield, St. Alban's C.E. (C.) Primary
<i>South West Division</i>	Coseley, Princes End Infants (Batman's Hill) Brierley Hill, Dawley Brook Primary Brierley Hill, The Dingle Primary (Crab Lane) Brierley Hill Secondary Boys

### New Kitchens in Existing Schools

<i>County Area</i>	Biddulph, Knypersley Hall Secondary Boys Hoar Cross, The Meynell C.E. (A.) Primary Lichfield, Springfield C.E. (C.) Infants
<i>Cannock Chase</i>	Chasetown, St. Joseph & St. Theresa R.C. (A.) Primary Pelsall Junior
<i>South East Division</i>	Bilston, St. Martin's C.E. (C.) Junior Bilston, Stonefield Primary

### Schools where there is no School Meals provision

There are now three schools which do not receive meals. These are:—

Hopwas, The Thomas Barnes Primary  
Stretton, The William Shrewsbury Primary  
Brownhills, Holy Trinity C.E. (C.) Infants

### Meals on Wheels

There has been some expansion in the service supplied from school meals kitchens and an average of 700 meals per week have been supplied compared with 446 per week in 1964.

The meals are supplied from the following schools:—

<i>County Area</i>	Ashley Secondary Betley, St. Margaret's C.E. (C.) Primary Biddulph Central Kitchen Codsall Secondary Halmerend Secondary Kinver, Edgecliff Secondary Kidsgrove, Clough Hall Comprehensive Wombourn, St. Benedict Biscop C.E. (C.) Primary
--------------------	--

## *South East Division*

Darlaston, King Charles Primary  
Wednesbury, Old Park Primary  
Wednesfield, Wood End Primary  
Wednesfield, Moat House Primary  
Wednesfield, March End Secondary  
Willenhall Comprehensive

It has not been possible to fulfill all requests owing to kitchens already working to full capacity.

## **Staffing**

The "turn-over" in personnel is high and difficulty is experienced in obtaining staff, more particularly in areas of the County where there is alternative employment at a higher rate of pay and more flexible working hours are offered. The attraction of the School Meals Service to married women, who are not required generally to work in school holidays, no longer seems to apply to the same extent. Suitable people willing to take the responsibility of running a kitchen are becoming increasingly scarce.

## **Training**

Courses have continued throughout the year chiefly for Cook/Supervisors, Cooks-in-Charge and Assistant Cooks at the permanent centres at the Girls' High School, Stafford and Pool Hayes Comprehensive School, Willenhall. The latter will be transferred under the West Midlands Review Area in April, 1966. It is hoped to provide another centre in the North of the County. Several courses have been held in other kitchens where it has been possible to arrange for staff to attend in a group. A four-day refresher course was held at Parkfields Secondary School, Coseley, during the Easter holidays.

Two senior members of the school meals staff are at present on leave of absence for one year attending a full time course at Radbrook College, Shrewsbury, leading to an Institutional Management Association Certificate in House-keeping and Catering.

## **Statistics**

Statistics as submitted to the Department of Education and Science in October, 1965, relating to the number of meals served during the Summer Term, 1965, are given below; together with the figures for the previous year for comparison:

**Table 41**

		1965	1964
No. of children present	... ...	143,960	140,146
No. of meals served to children daily		88,970	80,506
No. of schools provided	... ...	670	658
No. of schools not provided	... ...	3	5
No. of kitchens	... ...	348	336"

## PHYSICAL EDUCATION

The Director of Education has kindly supplied the following information:—

“ There has been steady progress in all branches of the work and with the provision of more indoor facilities, equipped with gymnasia apparatus, in primary and secondary schools inclement weather has not curtailed the programme of Physical Education to the same extent as in the past. In 1959 there were 202 schools with gymnasia and 2 with indoor swimming pools. Now there are 372 with equipped gymnasia and 13 with covered pools.

With the gradual spread of knowledge of the principles of educational gymnastics among teachers through attendance at local courses conducted by the Authority's P.E. Organisers and training in Colleges of Education, the standard of the work and general posture of the children has improved.

Class teachers in primary schools usually instruct their own classes in physical education but there is now more specialisation. Teachers are combining subjects and those interested in physical education are taking over other teacher's classes. In primary schools without men teachers the scope of work is limited, particularly in the teaching of boys' games generally.

There are now Physical Education Specialist men teachers on the staffs of all secondary schools except in the small establishments in the rural areas in the north of the County. There is still a shortage of women teachers but the staffing position has improved mainly because more married women have returned to schools.

The new primary schools have playing fields attached and full use is made of these to take part in small-side team

games and learning the skills of the major games to be played at the secondary school stage. In secondary schools, the new interest in Olympic gymnastics and trampolining has continued to grow and a number of boys and girls have competed successfully in County and National championships. Athletics is taught in all secondary schools and inter-school athletic meetings have become as usual as cricket and tennis matches during the evenings and at weekends. A National Pole Vaulting Championship was again won by a scholar from Eccleshall Secondary School.

Many secondary schools play basketball and a high level of play is attained in the league competitions. The game of netball is played by girls in the majority of schools and in Stafford a tournament was arranged in November in which a number of secondary schools took part.

Local courses for teachers in Physical Education were held at Cannock, Stafford, Willenhall and Newcastle and there was a total attendance of 121. There were residential courses at the Madeley College and at Chasewater. 80 teachers took part.

Clothing, plimsolls and footwear were provided on loan to schools for use by pupils who were unable to provide their own regularly. These amounted to:—

Plimsolls	...	...	...	36,902
Games Boots	...	...	...	2,585
P.E. Shorts	...	...	...	15,256
P.E. Vests	...	...	...	8,277
P.E. Blouses	...	...	...	5,038
Games Jerseys	...	...	...	4,954
Games Skirts	...	...	...	464

Forty-eight boys and girls were given remedial exercises for minor postural defects, under the direction of qualified physical education teachers.

During the year, 15 junior halls and 2 secondary school gymnasias, were equipped with fixed and portable apparatus.

Swimming instruction for boys and girls was provided at 29 public baths during the summer. Unfortunately we were unable to use the baths at Walsall and Bloxwich and at Stoke-on-Trent during the last two terms of the year due to the increased needs of the County Borough Authorities own

schools. Every effort was made to arrange for the schools concerned to obtain swimming facilities elsewhere. Open air pools at Heath Hayes and Pheasey County Primary Schools were, with the kind co-operation of the Headmasters, opened for the use of schools nearby. 15 school baths were also used during the summer and 23 public and 15 school baths during the autumn and spring terms.

During the year—

8,819 learned to swim

359 obtained awards of the Royal Life Saving Society

1,006 obtained Survival Awards of the Amateur Swimming Association.

Camping and allied outdoor activities continued to grow in popularity. The camp at Teddesley Park was replaced by one at Shugborough. The site at Port Dinorwic in Caernarvonshire was used weekly for the first time by school parties. Coven, Chasewater and Cotwalton were used as usual and Adventure courses were held at Coven, Cotwalton and Shugborough Centres. The number of campers was:—

Summer term and holiday camps	...	4,401
Autumn camps	...	498
		4,899

The urge to run, jump and throw is strong in the young and every effort should be made to give scope to this to develop the individual in a pleasant and enjoyable way. The mind and the body are indivisible and we seek to educate the whole man to attain full mental and physical well-being. If boys and girls learn to enjoy games, athletics and swimming and dance at school they will seek to recreate through taking part in these activities in the days of leisure in adult life.”

### Children Neglected or Ill-treated in their own Homes

The Local Committees which were set up in accordance with the provision of the Joint Circular of the 31st July, 1950, of the Home Office, Ministry of Health and Ministry of Education are continuing to carry out valuable work in regard to these children and during the year fourteen cases were referred from the School Health Service to the Local Co-ordinating Officers.

## UNCLEANLINESS

**Table 42. Infestation with Vermin**

	1965	1964
Number of individual examinations of pupils in schools by nurses and authorised persons ....	308,900	312,539
Number of pupils found to be infested ....	5,800	6,863
Number of pupils for whom cleansing notices were issued. S.54(2) Education Act, 1944 ....	7	16
Number of pupils for whom cleansing orders were issued. S.54(3) Education Act, 1944 ....	—	1
Number of Sacker Combs sold .... ....	108	179

**Table 43. Analysis of Infestation**

<i>Number of children with infestation of:</i>	1965	1964
Body .... .... .... .... .... ....	3	5
Head Lice .... .... .... .... .... ....	490	576
Head Nits .... .... .... .... .... ....	5,307	6,282
Total number of children .... .... ....	5,800	6,863

Each term hygiene inspections are carried out in schools when the children's hair is examined by the school nurses. In 1965 there was a decrease of 1,063 in the number of children infested, almost all of whom were dealt with by the school nurses at the school clinics. Usually excellent co-operation is given by the parents who sometimes request that cleansing should be carried out. Unfortunately there are still some children who present a recurring problem of repeated infestation of their heads and need to be kept under continual surveillance by the school nurses.

When parents fail to keep their child's hair in a satisfactory state the Local Education Authority is empowered, after examination by an authorised person, to serve notice upon the parent or guardian of the infested child, requiring cleansing

to be carried out. This is to be followed by attendance at a cleansing centre so that an examination may be made. If, despite the notice to the parents the state of the child's hair is still unsatisfactory the school nurse cleanses it and a school medical officer issues a certificate afterwards to the effect that the child's hair is clean.

Should reinestation quickly recur the Local Education Authority may issue a compulsory cleansing order under which an authorised person is empowered to remove an infested child to a suitable place for cleansing to be carried out. The parent or guardian receives a copy of the order and the authorised person is informed that cleansing is necessary. After compulsory cleansing a certificate is issued by a school medical officer to show that cleansing has been satisfactorily carried out.

### **Foot Inspections**

Foot inspections have always been a regular feature of the work of the nurses in the School Health Service and it is estimated that 1,377 half day sessions were devoted to the work during this period.

Table 44.

## TYPE OF SCHOOL

Nursery		Infant		Junior		Secondary		Grammar		Comprehensive		Total in all Schools	
Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls
Number of children with unsatisfactory Footwear													
Too Small	1	5	4	83	83	273	100	92	—	13	11	400	463
Too Large	2	—	6	35	28	129	81	62	—	16	8	285	233
Requiring repair	3	12	11	244	179	656	427	316	—	51	31	1,279	906
Unsatisfactory style	4	2	3	417	720	2,082	3,041	2,125	17	62	251	4,894	5,863
Otherwise inadequate	5	2	1	49	56	234	218	58	—	18	14	361	358
Total of lines 1-5	6	21	25	828	1,066	3,324	4,088	2,680	2,297	17	64	349	7,219
Number of children with satisfactory footwear	7	426	384	13,329	12,965	40,954	37,261	13,447	11,775	219	552	4,311	72,686
Total number of children seen by School Nurse	8	447	409	14,157	14,031	44,278	41,349	16,127	14,072	236	616	4,660	79,905
Number of children with Unclean feet	9	20	8	933	573	2,878	1,405	1,229	806	2	263	85	5,325
Clean feet	10	427	401	13,224	13,458	41,400	39,944	14,898	13,266	234	614	4,397	74,580
Number of children with unsatisfactory socks	11	20	20	289	179	928	762	505	207	—	—	171	1,353
Foot Deformities													
Hallux Valgus	12	—	—	29	23	56	92	32	65	—	2	20	137
Everted Ankles	13	—	—	28	10	95	70	30	20	—	18	17	171
Overlapping toes	14	—	3	170	171	430	421	187	273	—	34	44	927
Callouses	15	—	—	28	19	206	246	372	305	4	23	36	629
Others	16	—	1	91	63	139	116	49	57	—	1	16	295
Total of lines 12-16	17	—	4	346	286	926	945	670	720	4	60	134	120
Number of children with corns	18	17	11	244	243	611	729	284	440	4	34	122	80
Foot Infections													
Athletes foot	19	—	—	24	5	106	47	191	99	8	9	87	16
Warts	20	1	—	71	67	439	422	388	406	8	23	88	88
Others	21	—	2	16	23	129	99	104	81	—	2	7	8
Total of lines 19-21	22	1	2	111	95	674	568	683	586	16	34	182	112
Number of children referred to S.M.Os.	23	—	3	89	63	299	328	211	329	6	7	7	612
													740

Table No. 45

Showing the percentage of children with:—	Nursery		Infant		Junior		Secondary		Grammar		Comprehensive		Totals	
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls
Unsatisfactory footwear	4.7	6.1	5.8	7.6	7.5	9.9	16.6	16.3	7.2	10.4	7.5	7.3	9.0	10.5
Satisfactory footwear	95.3	93.9	94.2	92.4	92.5	90.1	83.4	83.7	92.8	89.6	92.5	92.7	91.0	89.5
Unsatisfactory socks	4.5	4.9	2.0	1.3	2.1	1.8	3.1	1.5	—	—	3.7	3.5	2.4	1.8
Unclean Feet	4.5	2.0	6.6	4.1	6.5	3.4	7.6	5.7	0.8	0.3	5.6	2.2	6.7	3.8
Clean feet	95.5	98.0	93.4	95.9	93.5	96.6	92.4	94.3	99.2	99.7	94.4	97.8	93.3	96.2
Foot Deformities	—	1.0	2.4	2.0	2.1	2.3	4.2	5.1	1.7	9.7	2.9	3.1	2.6	2.9
Corns	3.8	2.7	1.7	1.7	1.4	1.8	1.8	3.1	1.7	5.5	2.6	2.1	1.6	2.1
Foot Infections	0.2	0.5	0.8	0.7	1.5	1.4	4.2	4.2	6.8	5.5	3.9	2.9	2.1	1.8

## Enuresis Alarms

Towards the end of 1957 it was decided to provide a number of nocturnal enuresis alarms under the nursing comfort provisions of Section 28 of the National Health Service Act, 1946 and since then there has been a regular demand for these. A report is also included in the annual report of the County Medical Officer of Health, but a brief summary of results is appended in respect of the children of school age who received the treatment during 1965:

**Table 46.**

No. of alarms in use as at 31st Dec.	...	220	Boys	Girls
Waiting list at 31st December	...	...	78	36
No. of children cured in 1965	...	...	65	25
No. of children improved in 1965	...	...	33	12
No. of children relapsed after treatment and then cured	...	...	1	—
No. of children relapsed after treatment but much improved	...	...	—	2
No. of children relapsed after treatment and awaiting further trial	...	...	7	2

### *Failures*

Too nervous	...	...	...	...	2	—
Heavy sleeper	...	...	...	...	3	1
Unco-operative mother	...	...	...	...	3	2

The proportion of cases assisted by this device gives grounds for satisfaction, for treatment in the past has often proved prolonged and difficult.

It is routine procedure to follow up cases twelve months after the trial period with an alarm ended and the criterion of cure is 12 months free from relapse.

Four special schools, Ashley, Needwood, Standon Bowers and Walton Hall have alarms and excellent results have been reported.

## SCHOOL PREMISES

### Inspection of School Premises

The following table shows the kinds of defects reported by School Medical Officers following their visits to schools during the year. Adverse reports were made upon 148 of the 560 schools which were visited. There were 68 schools with more than one defect. Eighty-two more schools were visited than in the previous year. Some of the defects were corrected in the same calendar year and of course other defects, reported prior to 1965, were also rectified.

Although School Medical Officers are required to inspect school premises and to report defects found, unless health is endangered, it does not necessarily follow that it is possible in all cases to have such defects rectified.

**Table 47.**

<i>Defective Conditions</i>	<i>No. of Defects reported</i>	
	<i>in 1965</i>	<i>in 1964</i>
Sanitary	60	58
Kitchens	36	34
Heating	20	16
Supply of Drinking Water	6	8
Lighting	19	17
Cloakrooms	18	10
Dining Rooms	16	13
Ventilation	7	6
Washing Facilities	14	9
Kitchen Wash-ups	2	2
Playgrounds	14	16
General Environmental	15	13
Miscellaneous	26	8
 Total Defects reported	 253	 217

### WATER SUPPLIES

During the year the County Health Inspectorate regularly sampled school water supplies for purity and, where applicable, the efficiency of the chlorination equipment and technique.

A total of 14 samples were taken for chemical analysis, of which

11 were satisfactory, and

3 were unsatisfactory

A total of 68 samples were taken for bacteriological examination, of which

45 were satisfactory, and

23 were unsatisfactory.\*

(\*This figure includes samples taken from known or suspected polluted supplies as a check against the efficiency of sterilisation measures.)

The situation at the end of the year was as follows:—

1 school had been connected to a public mains supply.

1 school had been closed.

7 schools were treating the water with chlorine tablets, filters or chlorination plants.

3 schools were receiving private mains water.

2 schools were receiving untreated water from their own boreholes.

1 school was receiving public mains water by churn.

## SWIMMING BATHS

The school swimming baths were inspected by the County Health Inspectorate at least once per term as a matter of routine and field tests were carried out on the spot to determine both the chlorine and pH content of the water. Advice on the operation of the bath was given to caretakers as and when necessary and special attention was paid to new baths or in cases where difficulties were experienced.

A total of 61 samples were taken for bacteriological examination, of which

56 were satisfactory, and

5 were unsatisfactory.

The 1 sample taken for chemical analysis was satisfactory.

During the year four new school swimming baths were opened, bringing the total to 28, comprising:—

19 Secondary Schools.

4 Primary Schools.

4 Special Schools.

1 Training College.

and of these:—

6 are open-air (heated) baths fitted with purification plants.

2 are fill and empty type which are hand chlorinated.

20 are covered baths equipped with purification plants.

**Table 48.**  
**Handicapped Pupils**

Category	Total known handicapped Pupils		Numbers in Special Schools (as recorded on form 21M)		Number placed in Special Schools in 1965		Number awaiting admission to Special Schools (as recorded on form 21M)		Number in or having special provision at an Ordinary School		Number having Home Tuition including those for admission to Special Schools		At Home without Tuition	
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls
Blind	19	14	15	11	1	2	3	2	—	—	—	—	1	1
Partially Sighted	28	23	19	14	3	4	1	1	6	4	—	—	—	—
Deaf	51	34	45	29	5	4	1	1	—	—	1	—	—	—
Partially Hearing	134	104	40	33	7	4	2	—	53	56	—	1	—	—
Delicate	687	623	41	31	10	11	7	3	78	53	5	4	—	—
Educationally Sub-Normal	913	520	485	239	179	81	55	59	443	171	20	8	—	—
Epileptics	125	113	5	2	2	1	1	1	143	139	2	1	—	—
Maladjusted	543	301	33	3	12	—	13	4	331	154	7	5	—	—
Physically Handicapped	551	435	91	48	19	10	7	5	432	343	30	20	—	—
Speech Defects	713	312	—	—	—	—	—	—	713	312	—	—	—	—
<b>TOTALS</b>	<b>3,764</b>	<b>2,479</b>	<b>774</b>	<b>410</b>	<b>238</b>	<b>117</b>	<b>90</b>	<b>76</b>	<b>2,199</b>	<b>1,232</b>	<b>65</b>	<b>39</b>	<b>1</b>	<b>1</b>
<b>GRAND TOTALS</b>	<b>6,243</b>	<b>—</b>	<b>1,184</b>	<b>355</b>	<b>—</b>	<b>—</b>	<b>166</b>	<b>—</b>	<b>3,431</b>	<b>104</b>	<b>2</b>	<b>—</b>	<b>—</b>	<b>—</b>

N.B.—Pupils attending Hospital Special Schools are only included in this table in the first column.

Only pupils from the Exempted District of Newcastle-under-Lyme who are in, or awaiting admission to residential special schools, are included.

Table 46 includes children who do not come within the categories of handicapped children as defined in the Handicapped Pupils and Special School Regulations, 1959. These suffer from a milder type of handicap which does not prevent their attendance at the ordinary school. They are, however, kept under constant supervision to ensure they are properly placed and so that the necessary action can be taken immediately some special educational provision is necessary.

The total number of known handicapped pupils increased by 1,973 as compared with 1964.

The medical records for handicapped children are sent to the child's General Practitioner on leaving school whenever it is felt that the handicap is substantial and is likely to continue into adult life.

## CONVALESCENCE AND DEBILITATED CHILDREN

Over 1,249 children suffering from debility and other defects which did not warrant their admission to open-air schools were kept under clinical observation and 175 children were admitted to convalescent homes for short periods during the year, this being a decrease of 13 admissions compared with 1964.

Parents value this service, for a period of convalescence has often substantially assisted their children to recover after illness or operation. Liaison is maintained with each child's family doctor before the child is sent for convalescence.

The following shows the distribution of children among the various homes which have been used:—

	B.	G.	Total
St. Mary's Home, Broadstairs	...	6	46
Broomhayes Home, Northam	...	—	2
Lanthorne Convalescent Home, Broadstairs	...	63	44
West Kirby Children's Convalescent Home	...	1	4
Rusland Hall, Ulverston	...	2	7
	—	—	—
	72	103	175

## Home tuition

Tuition is provided at home in accordance with Section 56 of the Education Act, 1944, for those children who are so severely handicapped that they cannot attend at either an ordinary, or special school, and also for those who cannot attend an ordinary school whilst a vacancy is being sought for them in a special school. This form of education is decided upon after examination by a School Medical Officer.

120 children were receiving tuition at the end of the year as compared with 99 in 1964.

For 112 of these children tuition at home was the best possible provision at the end of the year but the other 8 children were having home tuition as a temporary measure whilst awaiting a vacancy at a special school.

## HOSPITAL SPECIAL SCHOOLS

**Table 50.**

At the end of the year there were 52 Staffordshire children in Hospital Special Schools.

Prestwood Hospital, Stourbridge	...	...	11
Standon Hall Orthopaedic Hospital, Nr. Stafford	...	...	11
Queen Mary's Hospital School, Carshalton, Surrey	...	...	1
Robert Jones and Agnes Hunt Orthopaedic Hospital, Oswestry	...	...	4
Biddulph Grange Orthopaedic Hospital, Special School	...	...	25
			—
			52
			—

**Table 51. Classification of children referred to the Mental Health Authority**

<i>Classification</i>	<i>No. of Children</i>
Section 57(4) Education Act, 1944	...
Six boys and ten girls were referred under section 57(4).	16

### Prestwood Hospital School

The Director of Education has kindly supplied the following information:—

“On 1st April, 1965, the school moved from The Limes Hospital, Himley, to Prestwood Chest Hospital, near Stourbridge. At Prestwood, where a ward was adapted for children, there is more teaching space and over the last year the equipment of the school has been considerably increased.

Children are enrolled from the age of two years upwards. They are mostly tubercular and there are generally between twenty and thirty on register, with an average stay of four or five months. About half those admitted are immigrants.

The nursery classroom is separate and is well supplied with large toys, sand and water, games and puzzles. Improved

lavatory facilities are to be provided here and the area outside is to be developed as an adventure playground.

Children come from all types of schools, but owing to illness are often not achieving their potential standard. Individual teaching helps to overcome the children's difficulties and the aim is to make their work as creative as possible, to build on the child's own experience and to foster a sense of community to help toleration of the separation from home. It is hoped to be able to arrange educational visits outside the hospital grounds for children who are sufficiently recovered."

### **Further Education of Handicapped Young Persons**

The Director of Education has kindly supplied the following information:—

"Twelve handicapped persons, including four blind, two deaf and six disabled, who were over statutory school leaving age, were maintained in recognised Colleges providing vocational courses.

Fourteen persons were provided with tuition in their own homes, the teachers receiving good co-operation from the parents of the students concerned. The tuition given was in a variety of subjects, including reading, arithmetic, mathematics, history, shorthand, typewriting and commercial english, but reading was the main subject.

Classes were conducted at St. Margaret's Hospital, Great Barr, as part of the Authority's Evening Institute programme, and during the year between 350 and 400 persons attended the classes.

Classes under the jurisdiction of the Principal of the Stafford College of Art were held at St. George's Hospital and members of Lichfield Art School conducted classes at St. Matthew's Hospital at Burntwood.

Remedial classes were also arranged for a few of the girls at the Rowley Hall Girls' Training School."

## **STAFFORDSHIRE'S SPECIAL SCHOOLS AND CLASSES**

**FOR EDUCATIONALLY SUB-NORMAL PUPILS.**

### *Residential*

*Boys:* Loxley Hall

Age Range 8—16 years.

Standon Bowers

Age Range 10½—16 years.

*Girls:* Walton Hall

Age Range 8—16 years.

### *Accommodation*

80 boys

60 boys

48 girls

<i>Day</i>	<i>Accommodation</i>
<i>Mixed:</i> William Baxter, Cheslyn Hay	110 boys
Age Range 8—16 years.	and girls
High Arcal, Sedgley	120 boys
Age Range 8—16 years	and girls
The Fitzwarren, Tipton	120 boys
Age Range 8—16 years.	and girls
High Heath, Green Lane, Shelfield	120 boys
Age Range 8—16 years.	and girls
The Coppice, Abbotts Way, Westlands, Newcastle	120 boys
Age Range 7—15 years.	and girls
<b>MALADJUSTED BOYS</b>	
Ashley Residential School	30 boys
Age Range 11—16 years.	
<b>FOR THE PHYSICALLY HANDICAPPED</b>	
<i>Mixed:</i> Wightwick Hall	68 Boarding
Residential and Day	boys & girls
Age Range 5—16 years.	32 day places
<b>FOR THE DELICATE AND PHYSICALLY HANDICAPPED</b>	
<i>Mixed:</i> Blackfriars, Newcastle	80 boys
(Joint School). Day	and girls
Age Range 5—16 years.	
<b>FOR THE PARTIALLY HEARING</b>	
<i>Mixed:</i> Needwood. Residential.	145 boys
Age Range 5—16 years.	and girls

### REPORTS ON SPECIAL SCHOOLS IN STAFFORDSHIRE

The Director of Education has kindly supplied the following information:—

“(a) *Ashley Residential School for Maladjusted Boys*

Good progress has been made despite the fact that the school has been fully staffed for only one term. Considerable social and academic progress has been made, and it is hoped that the problem of shortage of staff will be alleviated when two new staff houses are erected.

The school spent a pleasing and rewarding week at the County School Camp at Shugborough Park. A wide and varied number of visits have been made to places of interest and several visits to the theatre have been enjoyed.

In the field of sport generally a number of boys have distinguished themselves and it is noteworthy that several new records were established at the School Sports which were

well attended by parents. It is also worthy of note that all the boys in the school can swim and have gained at least the red braid. Six boys have successfully passed the bronze medal of the Amateur Swimming Association and it is hoped in the near future that a number will go on to take the silver medal.

A number of boys are now able to spend week-ends at home and this has proved its usefulness in that it encourages boys to work for a privilege of this kind and gives them a sense of independence and responsibility. As ever, parents have always been encouraged to visit the school and I am pleased to state that a large number of them take advantage of this.

The minibus has been extremely valuable in enabling new social contacts to be made with other schools through the medium of sporting fixtures.

(b) *Loxley Hall Residential School for Educationally Sub-Normal Boys*

This year has been notable for major staff changes which have involved three teachers, Matron and Assistant Matron and because the changes have been spread throughout the year every term has been disrupted by staff shortage or new members settling in. Added to this the rebuilding project started in July and this has caused some disturbance which will continue throughout the next year.

In spite of all this the roll has been maintained at 79. All activities have continued and many of them extended to include younger boys. The school was fortunate to acquire an old ambulance during the year and have it converted to use as a minibus. This has already proved valuable in enabling journeys to be made at times convenient to the school and to allow a much wider range of outside activities.

(c) *Needwood School for Partially-Hearing Children*

There are 120 pupils on roll, 66 boys and 54 girls. County pupils number 30 and the remaining 90 come from other authorities, the most distant being Preston, Durham, Kent and Devon. The age range of pupils admitted continues to be wide and during the year has ranged from 13 to 5 years. Two-thirds of the pupils are of secondary age at present.

Two pupils took the C.S.E. examination and were awarded certificates in English, Mathematics and Technical Drawing. In addition to the usual activities at the school, sports teams have gone out to several other schools and clubs for fixtures. The seniors have had outings for canoeing and folk dancing. Six went on a pony trekking week-end in Wales and the Scout Troop camped in South Wales in the summer

holidays. Sixteen seniors spent a week at the County Sailing Centre in the Summer Term and a dinghy is now under construction in the woodwork department. Classes have been out on local educational visits including a trip to Bournville and to the County Agricultural Show, and eleven pupils were confirmed in All Saints Church, Rangemore, by the Bishop of Stafford.

Visitors to the school have included college students, speech therapists and a party of Youth Leaders from the U.S.S.R. Leavers during the year have all found employment, two in horticulture and the rest in factory and clerical work.

(d) *Standon Bowers Residential School for Educationally Sub-Normal Boys*

During the past year the school has functioned steadily with no major changes. Twenty-three pupils have left the school and with a corresponding intake of much younger pupils, school work, recreational activities and normal routine procedures have had to be modified.

Educational, recreational and social activities have continued in co-operation with other schools and organisations, and support has been given by external bodies including the Church Men's Society, Toc H, and the Round Table.

Inter-house matches and competitions involving indoor and outdoor activities have continued, and the school swimming pool (and the Baths at Newcastle) has been used regularly. A quarter of the pupils have been able to go home at week-ends and seniors have taken advantage of privilege passes to town. Many former pupils have visited or communicated by telephone or letter and happy relationships with pupils and parents have continued.

Consideration has been given to the various deficiencies in the school buildings, especially to the poor condition of the classrooms and shortage of residential accommodation for staff, and plans for adaptations, extensions or replacement are being considered.

The provision of a permanent staircase to our clothing store, alterations to the sick bay, redecoration of the dormitories and other rooms, improvements to central heating, etc., have been greatly appreciated.

Staffing is still a major problem. Continuity and progression have been hampered by changes of staff and shortage of suitable qualified and trained staff, but in spite of difficulties the school has functioned satisfactorily.

(e) *Walton Hall Residential School for Educationally Sub-Normal Girls*

About one third of the pupils are going home regularly for week-ends and others go home occasionally.

Swimming instruction has continued in the summer at Trentham and in the winter at Stafford Baths. Three girls have been successful in passing personal survival tests and this is the first time such an advanced level has been reached.

The teaching staff is now up to full strength and the Educational Psychologist is making regular visits. The minibus has been used for educational and leisure time activities. During the year nine girls have left but replacements have kept the number on roll up to the maximum number of forty-eight.

(f) *Wightwick Hall Residential School for Physically Handicapped Children*

The new building was completed in July, and has had a tremendous impact on the life of the school. From the physical point of view the swimming pool is the outstanding benefit, though it is surprising to what extent the P.E. apparatus installed in the hall has been utilised often by quite handicapped children in most unorthodox ways. The activity is not time-tabled though it is always supervised and this lack of directive probably contributes in no small way to the successful result. Other valuable facilities in this new extension are the science classroom, the library (which has been specially fitted to meet the many problems of bookrests, table heights and so on) and extra classroom space. It will now be possible to demolish a number of the old army huts which were in use as classrooms and make available to the children at least another acre of land. This is needed to give the children on tricycles a safe manoeuvring area away from "internal" traffic and other out-door activities.

Teacher shortages have made for difficulties throughout the year and it has not yet been possible to admit children up to the new agreed maximum of 100 (68 resident and 32 day) as a result. Socially, the life of the school has continued successfully. Visits have been extended and increased and many contacts with industry and commerce made.

(g) *Blackfriars Day School for Physically Handicapped and Delicate Children*

With the maximum numbers in the school and a waiting list of over twenty children the problem of accommodation has been very acute. Two new classrooms are to be built in

order to relieve this pressure on accommodation and also to provide better facilities for such subjects as Domestic Science.

The swimming bath which was designed for hydro-therapy and for recreational swimming has proved successful in this dual purpose. Many of the children are obviously benefitting physically even though the bath has been in use for only a short period.

Ten children were entered for the Newcastle School Leaving Examination and fifty-eight passes were obtained. Four children were entered and passed in a total of twelve subjects in the new Examination for the Certificate of Secondary Education.

Many visits took place including a week's field study in Anglesey with a party of children suffering from chest complaints. This field study was carried out with the co-operation of the Department of Biology of Keele University. A visit such as this combines the advantages of a week in the open air and considerable educational stimulus. A party of severely physically handicapped children was also taken on a holiday in North Wales with the aim of introducing these children to as independent a life as possible.

Parent/Teacher relationships are essential if a child is to progress educationally and socially and these relationships have been very good during the past year. Coffee evenings have been arranged so that parents and staff have an opportunity to discuss the problems of the children in detail. The parents have also been very active in helping at the Garden Party, organising social events and raising money to provide a first-class stereogram.

It has always been known that a full assessment of physically-handicapped children before they leave school is vitally necessary. It is therefore pleasing to report that Professor Campbell Stewart of Keele University has offered full co-operation in this problem and the University is providing a full assessment for those children who will be leaving school.

The Youth Club is expanding. In the first year its activities were purely social, but now the Club meets twice a week, one evening for social activities and one evening for vocational work.

(h) *The Coppice Day School for Educationally Sub-Normal Children*

The school opened in January, 1965, with 49 children on roll.

It is a well-designed, purpose built building, in a good residential area. There are six classrooms, a hall-gymnasium, library, boys' practical room, girls' practical room and flat.

Other facilities include a school garden and equipment shed, a games and athletics field and tennis and netball courts with suitable storage facilities. External swimming arrangements have been made. The majority of children are transported to and from school. All children stay to family-service lunch.

The staff consists of a Headmaster, six class teachers and a boys' practical teacher and three part-time teachers covering P.E. and Home Economy. There is a full-time Welfare Assistant.

One hundred and six children are now on roll. There are 63 boys and 43 girls, 75 pupils being from the Borough of Newcastle and 31 from the County. The age range is 7-15, and a gratifying proportion of children recently ascertained were 7-8 years of age. The mean I.Q. is 67. Four pupils have an I.Q. of less than 50, eleven have an I.Q. of over 75. Educational standards were very low initially, but good progress was made during the year. I.T.A. is in use in the lower classes.

The average attendance for 1965 was 87.5%.

Extra curricular activities include a Youth Club, formed on an experimental basis and running successfully, and camping.

(i) *High Arcal Day School for Educationally Sub-Normal Children*

The school has had a full complement of 120 children. The full and varied curriculum, culminating in the leavers' programme during the last year of school life (15-16 years) seems to fit the pupils for their post-school life. Close touch is maintained with all leavers until they are 18 years of age and even beyond that age many send or bring news of themselves. All are encouraged to join their local youth clubs and to join groups such as the Boy Scouts, Boys Brigade and Girl Guides again in their home vicinities. There is no difficulty in placing leavers in suitable occupations in this area and all seem to settle down fairly quickly to stable posts. The school is grateful to the many firms who allow visits to their works and factories, and for co-operation in the placing of children in employment.

(j) *High Heath Day School for Educationally Sub-Normal Children*

This day special school for educationally sub-normal pupils opened in April, 1965.

There are now 85 children aged 8-15 in the school (59 boys and 26 girls) and the numbers will increase until the full

complement of 120 pupils is reached. The children are drawn from Lichfield, Whittington, Aldridge, Little Aston, Great Barr, Chase Terrace, Burntwood, Hammerwich, Pelsall and Shelfield.

The intelligence quotients of the children range from 54 to 87. Several children have other handicaps such as epilepsy, asthma, speech defects and partial hearing.

The curriculum includes remedial work in the three R's and woodwork, pottery, gardening, housecraft, music, dancing and drama. The children make many educational visits and study the local community in an attempt to familiarise them with the world around and to develop social awareness.

Since the beginning of December, thirty children have been receiving weekly swimming instruction at Lichfield swimming baths and this is now a permanent arrangement.

(k) *The Fitzwarren Day School for Educationally Sub-Normal Children.*

The school, which opened in June, 1963, has continued to grow and there are now 107 children aged 8-16 years on roll (72 boys and 35 girls). Expansion will continue until there are 120 children in attendance.

During the year there have been developments in all aspects of school life. In particular, the special needs of children approaching school leaving age have received attention. A leavers' programme designed to ease the transition from school to working life has been instituted. Visits to local places of employment of varying types have taken place and the older children have taken part in various activities planned to give information and guidance about adult life.

Development has taken place in the sporting and recreational life. The school football team has been able to play a number of inter-school games. Greater success in the field of sport is expected as the boys in the school mature. Badminton is being developed as a spare-time activity in the school and it is hoped that this will interest some of the senior girls.

Many of the children attend weekly swimming lessons during the season and an encouraging number of awards have been gained.

(l) *The William Baxter Day School for Educationally Sub-Normal Children*

The school had a successful year and all children who left during the last year are now in full-time, regular employment.

Regular swimming instruction is still available and now the younger members have joined in, as the school has been allocated an extra period.

Full use is being made of the television set supplied by the County. Besides being very helpful adjuncts to teaching, the programmes are particularly beneficial to the leavers, especially those aimed at preparing the school leaver for the working world.

(m) *Leek Area Special Class*

The children in the Leek Area Special Class, located in the Mount Methodist School, West Street, Leek, since September, 1964, have settled in very well into an unfamiliar background. They come in by taxi and bus from a ten miles radius and also from local Leek schools. The class is made up of ten boys and five girls. The children who have left the class at the age of eleven have fitted in very well into the comprehensive system in Leek. Two of the children have been allocated places, which the parents have accepted, in Standon Bowers Residential School.

Visits have been made to the Fire Station, the Post Office, the Railway Station and the local market and i.t.a. was started successfully in September. Most of the children are finding great pleasure from being able to read. Swimming classes are held at the Leek Baths every Thursday with steady progress in attaining button awards. The children in the class have shown slow but steady academic progress and greatly improved social behaviour.

(n) *Willenhall Area Special Class*

The Willenhall Area Class was formed in September, 1964, from fourteen children attending primary schools in the Willenhall Area of the South-East Division of the County, and has been maintained at this number during 1965. Children were referred to the Unit because of severe backwardness in school and, in many cases, behaviour difficulties.

Average attendance during 1965 was 12.5 and the Unit provides places for children from seven local primary schools.

During the year four children were placed in special schools and three in secondary schools.

## STAFFORD DIAGNOSTIC UNIT

During 1965 forty children have been admitted to the Unit, of whom twenty-five are still attending. Twenty children have been discharged and of those thirteen have been admitted to normal primary schools on a full-time basis, and three have been admitted to schools for educationally sub-normal

children and/or maladjusted children. One child has gone to a school for delicate and physically handicapped children, one to a Junior Training Centre, one to a school for partially-hearing children, and one to a private school. Of the thirteen children admitted to normal primary schools, it is expected that several will go to special schools when they are old enough or when places in these schools become available.

The appointment of an extra full-time teacher has made possible an increase in the number of children able to attend in a given session. Most children now attend for two or three days per week, the remainder of their time being spent in a normal Primary School or Training Centre wherever possible.

In addition to the usual specialist visits, a speech therapist has attended the Unit regularly. More time has also been given to visits from teachers of the deaf, both for the purpose of carrying out audiometric testing and for giving auditory training to three hearing-impaired children.

A number of visitors have been welcomed to the Unit, including students, Training College Lecturers, doctors, and teachers and matrons from special schools, both from this county and from other counties where similar projects are being undertaken.

BOROUGH OF  
NEWCASTLE-UNDER-LYME

(EXCEPTED DISTRICT: STAFFORDSHIRE COUNTY COUNCIL)

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**SCHOOL HEALTH SERVICE**  
**REPORT**

**for 1965**

BY THE

**Borough School Medical Officer**

BOROUGH OF NEWCASTLE-UNDER-LYME  
(Excepted District)

SCHOOL HEALTH SERVICE STAFF

*Borough School Medical Officer:*

JOHN WARRACK, M.B., Ch.B., D.P.H.

*Deputy Borough School Medical Officer:*

PETER M. GREEN, M.B., Ch.B., D.P.H.

*School Medical Officers:*

LAURA CULLEN, L.R.C.P. & S.I., L.M.

(Appointed 11.1.65)

EDITH PARRY-EVANS, M.B., B.S.(Lond.), M.R.C.S.,  
L.R.C.P.

Dr. T. CRAIG (Part-time)

*Physiotherapists (part-time):*

Mrs. T. J. BLADEN, M.C.S.P.

Mrs. B. WAIN, M.C.S.P.

*Speech Therapist (part-time):*

Miss A. V. CHANDLER (Resigned 31.5.65)

*Ophthalmic Surgeon (part-time):*

P. J. M. KENT, M.R.C.S., L.R.C.P., D.O.M.S.

*Borough School Dental Officers:*

School Dental Officers (part-time)—

Mrs. J. PLUMB, L.D.S., R.C.S.

L. J. MYATT, B.D.S., L.D.S., R.C.S.

(Appointed 1.1.65)

*Dental Anaesthetists (part-time):*

Dr. Z. S. MILEWSKI

Dr. J. F. THOMPSON

*Dental Attendant*

Mrs. J. LEESE

## NURSING ESTABLISHMENT

The establishment of Health Visitor/School Nurses is 16, giving an equivalent of 7 3/11 full time duties to the School Health Service. From the resignation of Mrs. Jeffries on 31st August, however, this figure has not been reached as a replacement for that Health Visitor/School Nurse had not been obtained by the end of the year.

## SCHOOL POPULATION

The number of pupils on the registers of maintained schools (including Nursery Schools) at the end of the year was 13,956. This represents an increase of 42, the same rate of increase as in 1964/65.

### Number of Schools or departments—

Nursery Schools	...	...	...	...	4
Infant departments	...	...	...	...	12
Infant & Junior departments	...	...	...	...	8
Junior departments	...	...	...	...	11
Secondary Modern Schools	...	...	...	...	10
Secondary Grammar Schools	...	...	...	...	4
Blackfriars Schools	...	...	...	...	1
The Coppice Schools	...	...	...	...	1

## REVIEW OF THE FACTS DISCLOSED BY MEDICAL INSPECTION AND OF THE METHODS EMPLOYED FOR THE TREATMENT OF DEFECTS

### Physical Condition

The physical condition of the children examined at periodic medical inspections is shown in Table 1, Part A. in the statistical tables at the end of this report.

### Uncleanliness

Eighteen children were found to be verminous at routine school medical inspections.

At periodic cleanliness inspections of children a total of 51,103 examinations was made and 1,100 individual pupils were found to be infested. Cleansing notices were issued in 524 cases. More children were found to be infested than in 1964, when 948 were discovered and 593 cleansing notices issued.

Fifty children were cleansed at special sessions at school clinics.

## **Tonsils and Adenoids**

At periodical and special examinations 50 children were found to be suffering from enlarged tonsils and/or adenoids and were referred for examination by a specialist. During the year 219 cases received operative treatment through arrangements made by the School Health Service. In addition there were 755 cases which required only medical treatment and/or observation. Both these figures showed a decrease on the 1964 levels which were 270 and 860 respectively.

## **Skin Diseases**

Fifty-two cases of skin disease (dermatitis, impetigo, urticaria, ringworm, etc.) were discovered at medical inspections and found to require treatment. One case of skin disease was referred to the Dermatological Clinic at the North Staffs. Royal Infirmary for investigation and treatment.

## **External Eye Diseases**

Two cases of external eye diseases were referred for treatment during the year to the North Staffs. Royal Infirmary.

## **Defective Vision and Squint**

One hundred and fifty-five cases of defective vision and squint were discovered at routine and special medical examinations and were referred for treatment, being 137 cases of defective vision and 18 cases of squint.

The Ophthalmic Clinic is held each Monday morning in the Ophthalmic Room at Friarswood School Clinic. During the year 812 children had refractions carried out and in 134 cases spectacles were prescribed after examinations by the Schools Ophthalmic Surgeon.

## **Ear Diseases and Defective Hearing**

At routine medical inspections, 14 cases in this category were found to require treatment and all were referred to Consultants at local hospitals.

## **ADDITIONAL EXAMINATIONS**

### **Medical Inspection prior to admission to Training Colleges**

One hundred and one pupils had a special medical examination by the School Medical Officers before admission to colleges for training for the teaching profession.

## Medical Inspection of new Entrants to the Teaching Profession

Thirty medical examinations, with subsequent X-ray of chests, were carried out on new entrants to teaching.

## Children attending School Camps

During the year 39 children were medically examined before attending organised School Camps.

## PHYSIOTHERAPY

The Physiotherapists' provide treatment at the Clinic at Friarswood House, Priory Road, Newcastle and at the Blackfriars School, as shown below. It will be noted that hydrotherapy is now available at Blackfriars School in the school bath.

<i>FRIARSWOOD CLINIC</i> (Mrs. J. T. Bladen)	<i>BLACKFRIARS SCHOOL</i> (Mrs. Wain)
Tuesday, 10.0 a.m.—12.0 noon* 1.30 p.m.—3.30 p.m.* Thursday, 10.0 a.m.—12.0 noon* 1.30 p.m.—3.30 p.m.*	Monday, 9.15 a.m.—12.0 noon* 1.30 p.m.—3.30 p.m.* Wednesday, 9.15 a.m.—12.0 noon Hydrotherapy
* Breathing and Remedial Exercises and Sun-Ray Treatment	Friday, 9.15 a.m.—12.0 noon Hydrotherapy

Attendances at these various sessions during the year 1965 were as follows:—

	<i>Breathing Exercises</i>	<i>Remedial Exercises (Including Hydrotherapy at Blackfriars School)</i>	<i>Sun-Ray Treatment</i>
Blackfriars School	50 children 1056 attendances	45 children 1141 attendances	18 children 102 attendances
Friarswood Clinic	75 children 665 attendances	90 children 1029 attendances	42 children 330 attendances

## CHILD GUIDANCE

Fourteen children were referred to the Child Guidance Clinic at "Brampton Trees," Hanover Street, Newcastle.



## SCHOOL DENTAL SERVICE

Statistics regarding children inspected and treated during the year are given later in the report in Table IV.

## SCHOOL SWIMMING BATHS

Samples of water from the baths at Newcastle High School, Hempstall C.P. School and Blackfriars School were examined throughout the year.

Of 27 samples examined bacteriologically and for chlorine content only one was found to be unsatisfactory in both respects. This was in October at the Hempstalls bath.

## HEARING TEST SURVEY

All the Infant Departments were visited by the Audiometrist. The results of the survey and the follow-up of cases were:—

<i>No. of Children Examined in Survey</i>	<i>No. showing some hearing loss</i>	<i>Percentage of Children with some hearing loss</i>
941	72	7.6

Seventy-two children were followed up by being referred for specialist opinion and treatment, as shown below:—

<i>Observation</i>	<i>Treatment Advised</i>				<i>No consents returned or appts. not kept</i>	
<i>Re-Exam by Spec'list after 3-6 months</i>	<i>Further Hearing Test after 12 months</i>	<i>T's &amp; A's Operation</i>	<i>Myring-otomy</i>	<i>General Medical Super-vision</i>	<i>No Treatment Advised</i>	<i>Reports Pending</i>
8	12	4	4	17	4	15

## DISINFECTION OF PLIMSOLLS

Plimsolls used in the schools are regularly disinfected at the Disinfection Centre in Knutton Lane. This is in an endeavour to control the incidence and spread of foot infections.

## INSPECTION OF SCHOOL MEALS PREMISES

The Public Health Inspectors of the Borough pay periodic inspections to premises connected with the preparation and serving of school meals. Defects which are found on such visits are reported to the Borough Education Officer. Eighty-nine visits were paid to these premises during 1965.

## MILK IN SCHOOLS

The milk supplied to schools is sampled from time to time by the Public Health Inspection Staff. During the year seven such samples were submitted for examination at the Public Health Laboratory and all were found to be satisfactory, both in cleanliness and degree of pasteurisation.

## X-RAY OF KITCHEN STAFF

During 1965, 118 members of the schools meals service kitchen staff were X-rayed at the Chest Clinic under the scheme whereby each applicant for a post in this service must be declared free from pulmonary infection radiographically before being appointed.

## SCHOOL MEALS REPORT

The following information has kindly been supplied by the School Meals Organiser.

“ During the year school meals were supplied to the children and staff in the Borough of Newcastle-under-Lyme from the following kitchens:—

Knutton Central Kitchen	Langdale C.P. School
Bradwell C.P. School	Seabridge C.S. School
Bradwell C.S. School	Silverdale C.P. School
The Bursley C.P. School	St. Michael's C.E. V.C.
Cherry Hill C.P. School	Infants' School
Crackley Bank C.P. School	St. Wulstan's R.C. Primary
Ellison Street C.P. School	School
Hempstalls C.P. School	Blackfriars School
Eagle & Child Annexe	Hill Crest C.P. Junior
Four Nursery Schools	School
Four Grammar Schools	The Coppice School

Newcastle C.E. Secondary School Kitchen was opened in April.

Figures given below show the daily average number of meals served each month throughout the year compared with 1964.

	1964	1965		1964	1965
January	7,720	8,352	July	7,108	7,835
February	7,574	8,315	August	Holiday Period	
March	7,454	8,161	September	8,225	9,121
April	7,807	8,386	October	8,226	9,063
May	7,636	8,428	November	8,097	9,014
June	7,247	8,017	December	8,115	8,887

## Holiday Feeding

Throughout the year arrangements for the provision of meals during holiday periods were made so that any child could, on application, receive a school dinner. Children who stayed away for more than half the total number of days in any one holiday period, unless the parents had given a satisfactory explanation as to the reason for their absence, were denied meals the following holiday. At the end of the year it was decided that children who failed to attend for at least half the number of days of the holiday period should not be permitted free meals during the ensuing two holiday periods. On reinstatement in cases of further default, such children are liable to permanent exclusion. In every case letters were sent to the parents of the children concerned explaining the reason why they could not have dinners.

Approximately 135 children applied for meals during each holiday period.

The holiday meals were supplied and distributed to various meal centres throughout the Borough on rota from the following kitchens:—

Knutton Central Kitchen	Seabridge C.S. School
Cherry Hill C.P. School	Hempstalls C.P. School
Bradwell C.S. School	Bradwell C.P. School

Arrangements were made to open one meals centre at Chesterton, Knutton, Newcastle.

## Price of Meals

The price of dinners to school children, including Nursery School children, remained at one shilling per meal. The meals on wheels dinners remained at 1/10d. each. From 1st September, the cost of staff dinners were increased from 2/3d. to 2/4d. and meals for traffic wardens from 2/4d. to 2/5d.

## **Light Equipment**

Light equipment both for replacement and additional purposes was supplied to all kitchens and schools at the beginning of each term.

## **Maintenance of Equipment**

All electrical equipment, e.g. mixing machines, potato peeling machines, gravity feed slicing machines, food preparing machines and extractor fans, was serviced three times during the year. All gas equipment in kitchens, e.g. ranges, sterilising sinks, hot cupboards, and boiling pans were serviced twice during the year. All insulated food containers used for the transport of school meals were serviced twice during the year to ensure that there was a minimum amount of loss of heat during the time the meals were being transported from the various kitchens to the dining centres at the schools concerned.

## **Nursery Schools**

Cod liver oil was supplied to children only on the recommendation of the Medical Officer of Health. Orange juice was supplied daily to all children.

## **Blackfriars School**

On the recommendation of the Medical Officer of Health, individual diets continued to be prepared and served to all the children requiring them—at least seven different types of meals are served each day.

Each child continued to have two one-third pint bottles of milk per day—during the winter months this is made into a suitable drink, e.g. cocoa, Ovaltine.

Cod liver oil and orange juice are given when necessary.

## **Hygiene**

As in previous years, visits were made to the kitchens and wash-ups by the Borough Council's Public Health Inspectors.

Specific undesirable features were dealt with as and when money became available and the opportunity arose.

School meals staff continued to be medically examined and had a chest X-ray prior to appointment. A medical certificate stating that they were free from any disease which might make the preparation or handling of food by them harmful to others, was required from staff after every period of absence.

A full specimen meal was retained in the refrigerator at each kitchen every day and kept for twenty-four hours.

No re-heated dishes were served and any left-over food was disposed of daily.

Dish cloths, teacloths, floor cloths and aprons were boiled daily.

Uniform was laundered weekly and replaced whenever necessary.

First aid supplies, cleaning materials and grease-proof paper were issued to the kitchens and schools at the beginning of each term.

## Meetings and Courses

Meetings of Cook Supervisors and Cooks-in-Charge were arranged as and when necessary.

Three members of the School Meals Service attended for one day per week at the North Staffs. College of Technology and all were successful in passing their examinations.

The diet was planned and varied so as to secure nutritionally balanced meals according to the age of the children concerned.

The school meal provides a sound diet for growing children and takes into account the possibility of deficiencies in the child's home diet."

## PHYSICAL EDUCATION

The Physical Education Organiser has kindly supplied the following report:—

### "GENERAL SURVEY

This year has been the first for some considerable time that the staffing of the P.E. Department caused little concern. This has meant that the general standard of P.E. has been more than maintained.

Clothing and plimsolls were provided in the Secondary Modern and Primary Schools. The cost of this service increases yearly and the question of adequate laundering raises many problems.

Disinfection of plimsolls, to combat foot infection, is carried out at the end of each term.

Cleanliness of changing areas and shower units is of the highest standard possible. Swabbing out and disinfection is part of the daily routine.

## FACILITIES

### Secondary Departments

All the secondary departments now have the use of indoor facilities for physical education and, with the exception of one school, they have special facilities for changing.

There is still a lack of showering facilities. Four Modern Schools have no showers, but this should be partially rectified during 1966 when three of these schools will have new facilities.

### Primary Departments

All Junior and Infant departments now have indoor facilities for P.E.

## SUMMARY OF FACILITIES

### Secondary

<i>Schools</i>	<i>Gyms</i>	<i>Gym/Halls with fixed apparatus</i>	<i>Halls</i>	<i>Changing Rooms</i>	<i>Showers</i>
13	6	5	3	12	10

	<i>Schools</i>	<i>Halls</i>	<i>Fixed Equipment</i>	<i>No Indoor Facilities</i>
<b>Infant</b>	12	12	6	0
<b>Junior</b>	19	19	15	9

All junior schools with suitable accommodation have now been equipped with fixed apparatus. Of the four schools without fixed apparatus, two use halls which are not the property of the L.E.A. and the other two use halls the fabric of which would not stand the stress of fixed apparatus. It is hoped, depending on the architect's report, to equip a further two infant halls during the coming year.

## STAFFING

The semi-specialisation in physical education noted in some schools last year has continued. Members of staff with a knowledge of the subject are taking classes other than their own for P.E. This in the main has been an advantage.

## PLAYING FIELDS, GAMES AND ATHLETICS

There is still a marked lack of playing fields in the Borough but by full use of all-weather areas at Porthill Playing Field and Bradwell School the position has been relieved a little. Unfortunately we have been delayed on the Ashfields site so the field is not available.

The playing fields available, however, have been worked to and above their maximum loading, in catering for a wide variety of games and sports. Concern is felt about outside pressures in attempting to open these fields to general use. This could only have a serious effect on the Physical Education teaching done by the schools. It must be remembered that a playing field is a teaching space and not an area set aside for general recreation.

## SWIMMING

### Primary Schools

The teaching bath at Hempstalls School is now showing its full worth. Every child in the Borough in its last year in the Primary school has the opportunity of attending, and only those producing doctor's certificates have been excluded. Some third year children also attend.

The tuition is from swimming instructors aided by members of staff.

This project has been most worthwhile as the results for the year have shown. The Water Proficiency Test shows that 89% of children attending the bath have learnt to swim during the past year and a further 300 have passed the Red Braid Award.

### Secondary Schools

#### Attendances and Awards

Class	Teaching Attendances	Swimming Club	Red Braid	Green Braid	Yellow Braid	White Braid	Blue Braid	RLSS	ASA	Survival
Girls	38,185	4,455	468	258	129	80	375	76	117	173
Boys	53,856	3,225	437	242	92	29	438	257	61	95

## CAMPING

Three hundred and eighteen pupils from Borough Schools attended camps at Cotwalton, Shugborough, Coven and Chasewater during the Summer Term, where hiking, canoeing, sailing and rock climbing were taught, as well as basic camp craft.

During the Autumn Term 38 boys and six girls attended Adventure Courses. These are only a small section of the children who applied, for the number of places available is comparatively small.

Schools continue to make use of the camping equipment which can be obtained on loan from the Education Office.

The Sailing Centre for Borough Schools established at Stanley Pool in 1962 had a most successful season last year. The camp was occupied every week-end from Whitsuntide to the end of October. Several schools also arranged full week camps at the site.

## TEACHERS' REFRESHER COURSES

Teachers from the Borough attended various courses in Physical Education both locally and also at centres organised by outside bodies.

## ADVANCED TRAINING COURSES

Following the pilot scheme of 1964 Advanced Training Courses in football, netball, hockey, trampolining, swimming and basketball were arranged during the Christmas holidays. The aim of these courses is to give the best performer in the Borough and district schools the opportunity of advanced coaching and training. To aid this outside coaches are employed and teachers from the various sporting associations act as administrators and extra coaches. The excellent results obtained during the courses have shown that this experiment has been well worth while."

**Medical Inspection of Pupils attending Maintained Primary and Secondary Schools (including Special Schools). Year ended 31st December, 1965.**

**TABLE I.**  
**PART A—PERIODIC MEDICAL INSPECTIONS**

Age Groups Inspected (By year of Birth) (1)	No. of Pupils Inspected (2)	Physical Condition of Pupils Inspected	
		Satisfactory	Unsatisfactory
		No. (3)	No. (4)
1961 and later ..	183	183	—
1960 .. ..	44	44	—
1959 .. ..	1039	1035	4
1958 .. ..	150	150	—
1957 .. ..	120	120	—
1956 .. ..	670	670	—
1955 .. ..	569	569	—
1954 .. ..	151	151	—
1953 .. ..	152	152	—
1952 .. ..	97	97	—
1951 .. ..	1,118	1,118	—
1950 and earlier ..	569	569	—
<b>TOTAL</b> ..	<b>4,862</b>	<b>4,858</b>	<b>4</b>

Column (3) total as a percentage of Column (2) = 99.91%

Column (4) total as a percentage of Column (2) = 0.08%

**PART B—PUPILS FOUND TO REQUIRE TREATMENT AT PERIODIC MEDICAL INSPECTIONS**

(excluding Dental Diseases and Infestation with vermin)

Age Groups Inspected (By year of birth)	For Defective vision (excluding squint)	For any of the other conditions recorded in Table II	Total Individual Pupils
1961 and later ..	1	7	8
1960 .. ..	—	3	3
1959 .. ..	2	44	44
1958 .. ..	2	25	25
1957 .. ..	2	5	7
1956 .. ..	24	41	62
1955 .. ..	11	37	44
1954 .. ..	3	20	23
1953 .. ..	5	15	18
1952 .. ..	9	23	25
1951 .. ..	47	74	123
1950 and earlier ..	31	30	51
<b>TOTAL</b> .. ..	<b>137</b>	<b>324</b>	<b>433</b>

## PART C—OTHER INSPECTIONS

Number of Special Inspections	..	..	..	..	..	..	376
Number of Re-Inspections	..	..	..	..	..	..	322
							—
Total	..	..	..	..	..	..	693
							—

## PART D—INFESTATION WITH VERMIN

Total number of individual examinations of pupils in schools by School Nurses or other authorised persons	..	..	..	..	51,103
					examinations
Total number of individual pupils found to be infested	..	..	..	..	1,100
Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act 1944)	..	..	..	..	524
Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3), Education Act 1944)	..	..	..	..	50

TABLE II.

Return of Defects found by Medical Inspection during the year ended 31st December, 1965  
 PART A—PERIODIC INSPECTIONS

Defect Code No.	Defect or Disease	ENTRANTS		LEAVERS		OTHERS		TOTAL
		Requiring Treatment	Requiring Observa- tion	Requiring Treatment	Requiring Observa- tion	Requiring Treatment	Requiring Observa- tion	
4	Skin	3	66	41	152	8	97	52
5	Eyes—	..	..	5	50	54	139	315
	(a) Vision	..	..	19	231	9	28	389
	(b) Squint	..	..	51	78	—	10	157
	(c) Other	..	..	12	1	20	10	42
6	Ears—	..	..	..	..	14	5	67
	(a) Hearing	..	..	6	27	7	5	11
	(b) Otitis Media	..	..	2	32	—	16	3
	(c) Other	..	..	..	2	8	10	8
7	Nose and Throat	..	..	15	299	9	128	262
8	Speech	..	..	..	29	—	21	32
9	Lymphatic Glands	..	..	3	33	1	2	70
10	Heart	..	..	1	25	5	29	45
11	Lungs	..	..	4	92	2	45	33
12	Development—	..	..	..	..	..	..	4
	(a) Hernia	..	..	..	6	—	2	16
	(b) Other	..	..	..	71	2	23	71
13	Orthopaedic—	..	..	5	55	3	160	11
	(a) Posture	..	..	8	115	1	118	84
	(b) Feet	..	..	2	29	2	46	166
	(c) Other	..	..	..	..	..	..	44
14	Nervous System—	..	..	..	..	..	..	..
	(a) Epilepsy	..	..	..	6	—	1	6
	(b) Other	..	..	..	55	—	43	43
15	Psychological—	..	..	..	..	7	—	1
	(a) Development	..	..	..	..	..	..	1
	(b) Stability	..	..	..	..	..	..	41
16	Abdomen	..	..	3	7	2	123	5
17	Other	..	..	..	37	16	107	22
							12	94
							12	28
								238

## PART B—SPECIAL INSPECTIONS

Defect Code No.	Defect or Disease			SPECIAL INSPECTIONS	
				Pupils requiring Treatment	Pupils requiring Observation
4	Skin .. ..			8	29
5	Eyes—(a) Vision .. ..			28	48
	(b) Squint .. ..			2	16
	(c) Other .. ..			—	11
6	Ears—(a) Hearing .. ..			2	12
	(b) Otitis Media .. ..			—	5
	(c) Other .. ..			—	—
7	Nose and Throat .. ..			5	66
8	Speech .. ..			10	20
9	Lymphatic Glands .. ..			1	6
10	Heart .. ..			13	16
11	Lungs .. ..			9	57
12	Development— (a) Hernia .. ..			—	—
	(b) Other .. ..			3	11
13	Orthopaedic— (a) Posture .. ..			4	24
	(b) Feet .. ..			6	26
	(c) Other .. ..			14	37
14	Nervous System— (a) Epilepsy .. ..			1	13
	(b) Other .. ..			—	21
15	Psychological— (a) Development .. ..			—	43
	(b) Stability .. ..			1	40
16	Abdomen .. ..			1	11
17	Other .. ..			2	34

TABLE III.

### Treatment of Pupils attending Maintained Primary and Secondary Schools (including Nursery Schools)

#### Part A—Eye Diseases, Defective Vision and Squint

		Number of cases known to have been dealt with
External and other, excluding errors of refraction and squint		123
Errors of refraction (including squint) .. .. ..		812
Total .. .. ..		935
Number of pupils for whom spectacles were prescribed .. ..		134

#### Part B—Diseases and Defects of Ear, Nose & Throat

		Number of cases known to have been dealt with
Received operative treatment ..		
(a) for diseases of the ear .. .. ..		29
(b) for adenoids and chronic tonsillitis .. .. ..		219
(c) for other nose and throat conditions .. .. ..		34
Received other forms of treatment .. .. ..		150
Total .. .. ..		432
Total number of pupils in schools who are known to have been provided with hearing aids—		
(a) in 1965 .. .. .. .. ..		2
(b) in previous years .. .. .. .. ..		7

## Part C—Orthopaedic and Postural Defects

					<i>Number of cases known to have been treated</i>
(a) Pupils treated at clinics or out-patients departments	..	..	..	..	33
(b) Pupils treated at school for postural defects	..	..	..	..	135
Total	..	..	..	..	168

## Part D—Diseases of the Skin

(Excluding uncleanliness, for which see Part D of Table I)

					<i>Number of cases known to have been treated</i>
Ringworm—(a) Scalp	..	..	..	..	1
(b) Body	..	..	..	..	14
Scabies	..	..	..	..	9
Impetigo	..	..	..	..	23
Other skin diseases	..	..	..	..	2,840
Total	..	..	..	..	2,887

## Part E—Child Guidance Treatment

					<i>Number of cases known to have been treated</i>
Pupils treated at Child Guidance Clinics	..	..	..	..	14

## Part F—Speech Therapy

					<i>Number of cases known to have been treated</i>
Pupils treated by Speech Therapists	..	..	..	..	72

## Part G—Other Treatment Given

					<i>Number of cases known to have been dealt with</i>
(a) Pupils with minor ailments	..	..	..	..	2,259
(b) Pupils who received convalescent treatment under School Health Service arrangements	..	..	..	..	5
(c) Pupils who received B.C.G. vaccination	..	..	..	..	756
(d) Other than (a), (b) and (c) above	..	..	..	..	16
Respiratory	..	..	..	..	
Injuries	..	..	..	..	763
Total	..	..	..	..	3,799

TABLE IV

**Dental Inspection and Treatment carried out by the Authority  
during 1965**

The dental officers devoted 126 sessions to treatment, 15 to inspection and one session to Dental Health Education.

<b>Inspections</b>	<b>Pupils</b>
First inspection at school...	2,194
First inspection at clinic ...	216
Number found to require treatment	1,148
Number offered treatment	1,142
Re-inspections at school clinic ...	52
Number of these found to require treatment	44

**Attendances and Treatment**

First visit ...	491
Subsequent visits ...	717
Total visits ...	1,208
Additional courses of treatment commenced	6
Fillings in permanent teeth	718
Fillings in deciduous teeth	70
Permanent teeth filled ...	635
Deciduous teeth filled ...	70
Permanent teeth extracted	145
Deciduous teeth extracted	307
General Anaesthetics ...	86
Emergencies ...	69
Number of Pupils X-rayed	17
Prophylaxis ...	152
Teeth otherwise conserved	2
Number of teeth root filled	7
Inlays ...	2
Crowns ...	—
Course of treatment completed ...	102

**Orthodontics**

New cases commenced during year	7
No. of removable appliances fitted	1
Pupils referred to Hospital Consultant ...	1
No. of dentures supplied ...	9

**TABLE V**  
**Staff of the School Health Service**

	<i>Number of Officers</i>	<i>Number in terms of full-time Officers employed in the School Health Service</i>
<b>(a) Medical Officers (including the Principal School Medical Officer):—</b>		
(i) Whole-time School Health Service .. .. ..	—	—
(ii) Whole-time School Health and Local Health Services .. .. ..	4	1.98
(iii) General practitioners working part-time in the School Health Service .. .. ..	1	0.09
<b>(b) Physiotherapists, Speech Therapists, etc. (Specify):—</b>		
Physiotherapists .. .. ..	2	0.72
Ophthalmologist .. .. ..	1	0.09
Audiometrician .. .. ..	1	—
Chiropodist .. .. ..	1	0.06
<b>(c) (i) School Nurses .. .. ..</b>	15	6.82
<b>(ii) No. of the above who hold a Health Visitor's Certificate ..</b>	15	—

	<i>Officers employed on a Salary basis</i>		<i>Officers employed on a sessional basis</i>	
	<i>Number of Officers</i>	<i>Nos. in terms of full-time Officers em- ployed in the School Den- tal Service</i>	<i>Number of Officers</i>	<i>Nos. in terms of full-time Officers em- ployed in the School Den- tal Service</i>
<b>(d) Dental Staff:—</b>				
(i) Principal School Dental Officer .. .. ..	—	—	—	—
(ii) Dental Officers .. .. ..	—	—	2	0.45
(iii) Orthodontists (if not already included in (d) (i) or (d) (ii) above) .. .. ..	—	—	—	—
(iv) Dental Surgery Assistants .. .. ..	..	..	1	0.36
<b>(v) Other Staff (specify):—</b>				
Dental Anaesthetist .. .. ..	..	..	—	—

\* All Medical Officers of the School Health Service other than those employed part-time for specialist examination and treatment only.

## TABLE VI

(ii) **NUMBER OF SCHOOL CLINICS** (i.e. Premises at which clinics are held for school children) provided by the Local Education Authority for the medical and/or dental examination and treatment of pupils attending maintained primary and secondary schools.

**NUMBER OF SCHOOL CLINICS** ... 11 (including one Mobile Dental Clinic)  
 (iii) **TYPE OF EXAMINATION AND/OR TREATMENT** provided, at the school clinics either directly by the Authority or under arrangements made with the Regional Hospital Board for examination and/or treatment to be carried out at the clinic.

<i>Examination and/or treatment</i>	<i>Number of School Clinics (i.e. premises) where such treatment is provided</i>		<i>Under arrangements made with Regional Hospital Boards or Boards of Governors of Teaching Hospitals</i>
	<i>Directly by the Authority</i>	<i>Under arrangements made with Regional Hospital Boards or Boards of Governors of Teaching Hospitals</i>	
Minor Ailment and other non-specialist examination or treatment	.. ..	9	—
Dental	.. ..	2	—
Ophthalmic	.. ..	1	—
Ear, Nose and Throat	.. ..	—	—
Orthopaedic	.. ..	—	—
Paediatric	.. ..	—	—
Speech Therapy	.. ..	1	—
Physiotherapy	.. ..	2	—
Orthoptic	.. ..	—	—
Sun Ray (U.V.L.)	.. ..	2	—
Chiropody	.. ..	1	—
Rheumatism & Heart	.. ..	—	—
Asthma	.. ..	—	—
Remedial Exercises	.. ..	2	—
Vaccination & Immunisation	.. ..	—	—
Audiology	.. ..	—	—

**TABLE VII Handicapped Pupils requiring Education at Special Schools approved under Section 9(5) of the Education Act, 1944, or Boarding in Boarding Homes**

During the calendar year ended 31st December 1965, how many handicapped pupils—		(1) <i>Blind</i>	(2) <i>Partially sighted</i>	(3) <i>Deaf</i> (4) <i>Partially hearing</i>	(5) <i>Physically handicapped Delicate</i>	(6) <i>E.S.N.</i>	(7) <i>Maladjusted</i> (8) <i>E.S.N.</i>	(9) <i>Epileptic</i> (10) <i>Speech Defects</i>	Total			
		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
A. were newly assessed as needing special educational treatment at special schools or in boarding homes ..		—	—	3	—	11	10	—	28	—	—	52 Day
		—	—	—	—	1	4	—	2	—	—	7 Res.
B. (i) No. of A above newly placed in special schools (other than hospital special schools) or boarding homes ..		—	—	2	—	4	6	—	23	—	—	35 Day
		—	—	—	—	—	1	—	1	—	—	2 Res.
(ii) children assessed prior to 1st Jan., 1965 how many newly placed in special Schools (other than hospital special schools) or boarding homes ..		—	—	—	—	1	—	—	43	—	—	44 Day
		—	—	—	—	—	—	—	2	—	—	2 Res.
C. On or about 20th January 1966, how many handicapped pupils from the Authority's area—												
(i) were requiring places in special Schools												
(a) Day		—	—	—	—	—	1	9	8	—	—	48
(b) Boarding ..		—	—	—	—	—	—	1	4	—	—	14
(ii) included at (i) had not reached the age of 5 and were awaiting												
(a) Day places		—	—	—	—	—	2	—	—	—	—	2
(b) Boarding ..		—	—	—	—	—	1	—	—	—	—	1

